Seri y'amaheresho ku byiciro bitandukanye by'ibiyobyobye.

Niba uri mu mwuka wa DXM, usabwa gushaka inkungahantu. Ibi bishobora kubera ibintu byinshi, birimo:

*** Umwuka mwinshi**
*** Uburindi**
*** Ukubura amashyira**
*** Ibimenyetso by'umutwe**
*** Imibonero**

Niba uri mu mwuka wa DXM, usabwa gushaka inkungahantu. Ushobora kwerekeza ku muganga cyangwa ku muganga w’ubuvuzi kugira ngo bawifashe. Ushobora kandi guhagarara kuri telefone y'inkunga y'ibiyobyobye no mu buryoba.

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Gukoresha Umurongo wa Recovery Kernel.

DXM · Dextromethorphan · Robo · Robotripping · Triple C · Skittles · DM · Gel Caps · Delsym

⚠ AMAKWIRA YO GUSHINGIRA KU BUTEGURANZA - NTIBIMENYETSO BYA BAGISOREZI. | Ibihe by'inzara: mwitwarire umunwa wa 912 cyangwa utumyeho ku numero ya findahelpline.com.

DXM + antidepresán (SSRI cyangwa MAOI) = guhungwa ku buhoro bishobora kuba bikiza. Reba imiti ushyandikirwa.

IMIKENGO YO KWITABIRA (DAYQUIL, NYQUIL, TRIPLE C) IRA INZIZA ZIVUZA ACETAMINOPHEN CYANE GATA CYANGA AMAHEREREZO Y'AMAGURU

(ANTIHISTAMINES) ZISHOBORA KUTUMA IBIMORE BYAHO BIHINDUKA CYANE BIZANA INDIGO CYANE GATA CYANE HAKOZEKAGA UBWINSI BW'UMWANDA.

Abo bantu bagira ibibazo byo gukora imirimo y'umuhuza CYP2D6 bahura n'imyitwarire itanduye ya DXM, kandi bashobora guhura n'ibyago byinshi cyane byo kuba barwaye serotonin syndrome.

Ibiganiro bitangira.

Ibyavuga ku "Recovery Kernel" bisobanura ibyerekeye DXM mu buryo busanzwe butatu, kandi uburyo bwose bugiye gushyira hamwe buvuga neza impamvu iyi ntangazina irengagizwa kandi kuko irenga ubuzima.

Ubuvugizi bw'umutekano w'imiti itangwa mu masaha ya mbere: "Imiti itangwa mu masaha ya mbere ntibishobora kuba umutekano ku bose." Ibi bitabo bigaragaza iki kuri genomi y'ubuvumbuzi (pharmacogenomics) ya CYP2D6, aho imiti ivurwa na iyi nshongye igira ingaruka zidakoranye uko mu bantu batagira ubushobozi bwo kuvura neza uretse abantu bagira ubushobozi. DXM ni urugero runini rw'ibyo byo: umuntu utagira ubushobozi bwo kuvura (CYP2D6 poor metabolizer) uyifashisha DXM ku ngingo zivumburwa mu buryo bwuzuye kugira ngo yirinde guhumuka, ashobora gukurikizwa no kuba afite syndrome ya serotonin. Mu gihe umuntu ayifashisha ku ngingo zinyampe, ingaruka zigaragazwa zitandukanye n'izo umuntu ufite ubushobozi bwo kuvura yagira ku mugore imwe.

Ubuvuga bwa kabiri, ikigero cy'acetaminophen gishobora kugabanyiriza glutathione: Iyi raporo yigaragaza ko acetaminophen ni kimwe mu byangiza ibyuma by’umwani (glutathione), umwasi ukomeye w’umwani. Imikino myinshi irimo DXM kandi igaragazwa na acetaminophen. Muri metero mikuru, acetaminophen ishobora gukiza umwani. Umuntu ushaka kugira ingaruka z'inyangamugayo zo guhuza (dissociative effects) kuva muri NyQuil cyangwa DayQuil, ashobora gutanga umwani we igiciro gikomeye cy'ikintu gishobora kumukiza.

Icya gatatu, ibyerezo byo guhagarika no gukoresha receptor za NMDA: Uburyo bwa DXM bugaragaza cyane umusaruro wo guhagarika bwo gukora ku receptor za NMDA – urwego rwegereranyweho rituma ketamine ifite ubushobozi bw'ubuvuzi kandi itanga ibyishimiro. Ibyiciro byo mu raporo ku ketamine, birimo kwigarurira neza umushinga w’ibintu bifatwa nk’ingingo z’ingenzi, guhagarika urwego rw'umushinga, no gushyira hamwe ibintu bitandukanye, byose bigaragazwa hano – ariko binyuze mu buryo bw'imiti itangwa mu masaha ya mbere (OTC) igiciye $8 mu mavuta y’itangaza, itanga umuti utifuzwa, kandi itaratanzweho ubweme, kandi itari icyiciro cy'ibintu byatuma umuntu agira ikibazo.

Abantu bagurisha DXM batanga umuti utuma umuntu akomera vuba, kandi ni ikibazo gikomeye cyane kandi gishobora kutagaragara mu byiciro by'ubuvuzi. Abantu bakoresha uyu mutsuko bafite ishema, benshi muri bo ari abakiri bato n'abato. Uburyo bagurira iyi mvura y'umugogoro ni uko bayitunga saa mbere za nijoro. Iyi mvura ituma umuntu akomera vuba, kandi usanga abantu bayikoresha

babiziza nk'icyaha cy'abana, kandi batayitayeho mu buryo buhagaze. Abantu bakoresha iyi mvura bafite ishema, benshi muri bo baba baratandukanye, bagira uburare, kandi batahagararirwe n'ubushake bwo kubaka ubuzima bwabo. Iyi gahunda yihariye abantu bayohoza.

Soma Icyiciro 0 mbere y'ibindi - amakosa ya nyuma agatangaza ku byo gutanga umwarimu (toxicity) bya kombination z'ibintu bitandukanye birimo DXM ni amahirwe adasanzwe.

Icyiciro 0 - Umutekano Wihariye: Ibihebe by'umukino.

⚠ IKIBI CY'INYABIZU KIKIRE CYO KU DXM NTIGUKIRA DXM YIHUTZE, AHUBWO NI IBINDI BIHEREREYE MU BYUMA.

0.1 — Ububabaro bw'ibicurashya: Ibirindi birimo mu buryohe.

THE CENTURION — Uburyo bw’Ubukire Buhwanya: Ibyiciro by’Imiti itangwa mu Bitaro. - Ikiganiro cyo muri "The Compendium" gishyizwe neza.

DXM si igikoresho gishoborwa kugurishwa cyonyine. Ibinyobwa by'ubuhome na butwayo bya ngombwa bya ba konsimuse bikurikijwe na DXM ahandi hari ibindi binyobwa bifite imbaraga zikiza, kandi bigira ingaruka mbi niba bihagurukirwa mu mimerere yifuzwa kugira ngo DXM ifashe gukurura. Itabara riri hasimbuye ni umugenzuzi ukomeye muri iyi gahunda - rigaragaza niba ibintu umuntu yakoresha bigiye guhungana cyane bitewe na DXM, cyangwa bitewe n'ibindi binyobwa.

Inganzo zindi zifashishwa hamwe.	**Tuyoboye.**	**Ibihebe byo gukoresha bidatanga umusaruro kandi bishobora kugira ingaruka.**	**Niba hari icyifuzo cyo kuba umuntu yanduye,** *** Hamagara igipimo gishoborwa ku mugore.** *** Hamagara umuganga.** *** Ibiribagazo ntibyongereyeho.** *** Ubu buryo ntibubuzwe.**
Acetaminophen (APAP / Tylenol)	NyQuil, DayQuil, na seroyi zindi zo gufasha.	Uburwara bw'igogoro (gutakara kw'igogoro) bishobora kubera abantu bavuye ku mugongo igihe bavanga ibintu birenga 4g/umunsi, cyangwa n'ibindi birengana munsi y'ibyerekeye abagira ikibazo mu maro. Iburwara biba nkaho butabonekeka mbere—imyirondoro	Iyo umuntu yafashe dosage nyinshi ya acetaminophen, hanyuma akoreshewe NAC ibice bibiri (600mg) mu kanya. Mugana ku muganga w'ubuvuzi niba dosage yari ikomeye cyane. Gukora uburebure bw'ama enzymes y'igogoro. Ntihagire uza gutegereza uko azabyumva—ibyore by'igogoro bishoborwa gukira, ariko bisaba

		y'uburware yigaragara nyuma y'amasaha 24-72 nyuma yo gukora ibyo bitera uburware.	kuganirizwa vuba.
Chlorpheniramine (umuti utanga umunyuzi).	Coricidin Cough & Cold (Triple C) — IYABERA IMASHAKIRO CYANE KU BWINSI.	Ubwazo bw'imiti itanga ibintu birimo anticholinergics igihe imibazo yaterwa no kuyinywa: guhagarara, kwishima kwinshi, umutima ugitera hashidikimana, kutagira ubushobozi bwo kujya mu birori, gutakaza ubwondo, gufata, n'inzara z'umutima. Hari imyirondoro myinshi y'abantu bataye muri make kubera ubuzima bw'umuntu butuma umuntu afata chlorpheniramine igihe abantu banywa Triple C.	Wubike umugani wa 912 uhereye ku butunganya bw'umukoranyi bwa chlorpheniramine. Ubwonka bwo gukurikira imiryango y'ibintu bituma ibyo gutanga (anticholinergic) bisaba kwitabwaho mu kivuga bya muganga— physostigmine mu bihe bikomeye. Ibi BINGA kuregwa mu rugo.
Guaifenesin (umufungura).	Robitussin DM, ibinyanga byinshi.	Uburindi bwinshi n'ubugogoro mu gihe umuntu yifashisha ibiribwa ku buryo butubahiriza dosi. Ntabwo bigira ingaruka zigaragara cyane, ariko kuryosha ibiribwa byinshi bitera uburare bukomeye kandi bishobora kugabanyiriza ubushake bw'umuntu, ndetse n'uburemere bw'ubugogoro bwashobora gufata umuntu ku ngufu.	Umwanya wo gufasha umuntu: Mu gihe umuntu yanduye n'umuti, hamwe no kwandura, mufatire umwanya wo kumufasha. Guhindurwa mu mwanya wo gukora ubushobozi bw'ubuzima. Si ikibazo gikomeye cyane mu byinshi, ariko bigabanyiriza igiciro cy'imiti yifashishwa ituma umuntu agira ibyore byinshi.
Pseudoephedrine cyangwa phenylephrine	Sudafed PE DM, imikunyu myiza	Ubwazo bw'ibiribwa bifatanya n'imikundiro:	Uruhumyi mu ngoro, igihanga gikora hakurikira cyane,

(umuti ushobora gufasha mu kuruhuka).	itandukanye yo gufasha mu kurwanya indwara z'ubuhaya.	guhagarara kw'umwihano, igipimo cyo gutera umutima, ukubaho k'imitima, no kuba mu mwihano w'amaraso. Uburyo bwinshi bw'ibiribwa bifatanya n'imikundiro yo gukora imirire y'umwihano butuma igipimo cyo guhagarara kw'umutima kiyongera.	cyangwa umutwe ukangara cyane ubwo wifashisha imiryo ituma ibice by'umubiri bishyiremo amamazi n'umuti DXM: mwitware numunyamahanga wa 912. Gukemura ibibazo byo mu marimbitse y'umwihugu.
DXM gusa - ibicuruzwa byiza cyane.	Delsym (polistirex ya DXM yo mu buryo bwo gutanga umuti buhoraho), kapsuli z'amazi yuzuye za DXM HBr, Robitussin 12-Hour.	Ubukiza bwa DXM: Ibihebibi byo guhagarara (serotonin syndrome) bigorana (cyane n'imiti ya SSRI), inzara y’ubwonotsa ituruka ku gukoresha dosage nyinshi, ibimenyetso byihariye byakomeza. Nta ngaruka zivuye ku mazi cyangwa umutwe zituruka ku bahanini bindi.	Kuva ku buryo bwo gushyira mu gaciro ubuzima, iyo umuntu yifashisha DXM: ibicuruzwa by'umwimeri wa DXM ni byo byiza kurusha ibicuruzwa byiyonganyije. Ariko, iki ni icyerekezo cyo gushyira mu gaciro ubuzima, bidatanga ubuhamagarano.

⚠ CORICIDIN COUGH & COLD (TRIPLE C) ni umuti munini cyane kandi uravuzwa cyane ku mpamvu z'ubwa mugore. Ibirungo bya CHLORPHENIRAMINE bifite icyanga gikomeye, si DXM. NTI UKWIJANDIKA KUGURA TRIPLE C UGIHINDUYE DXM.

0.2 — Sindromo ya Serotonini: Ubuvugizi bw'Imiti Buhangayitse.

⚠ DXM ihindura ubushoborero bwo gukwirakwizwa kwa serotonini. Iyo yakoreshejwe hamwe n'imiti y’ibindi bituma umwani, byatanga syndrome ya serotonini ishobora gutera urupfu. Iyi ni imikoma ikomeye cyane ituruka ku kugabura DXM, kandi ishoborwa guhindurwa.

DXM ni umuti utuma serotonini ikongera (serotonin reuptake inhibitor) - uburasa SERT, urwego rwegereranywe n'imiti ya SSRI. Ubwo buryo bwa DXM butangwa hamwe n'imiti yindi itangiza imirimo ya serotonini, byatuma hiyongera cyane serotonini, kandi ibyo byaba bibi:

- SSRIs (Prozac/fluoxetine, Zoloft/sertraline, Lexapro/escitalopram, Celexa/citalopram, Paxil/paroxetine): zose zibamaraho SERT - igabanyijeho ubushake bwo gukoresha DXM = inzara y'iserotonini. Paroxetine cyane ituma CYP2D6 ihinduka, ibi bisobanura ko nayo iteza imbere DXM kuva dextrorphan, byongera kandi levels za DXM mu maraso NO n'inzara y'iserotonini.
- SNRIs (Effexor/venlafaxine, Cymbalta/duloxetine): inzobera serotonin *ndetse* na norepinephrine — igabanyijeho ubushobozi bwo gukoresha, kandi ikiyongeraho DXM = myinota y'inyangamugayo zishobora kuzamura.
- MAOIs (phenelzine, tranylcypromine, selegiline, dose yikomeye ya St. John's Wort, Ayahuasca/harmaline): zirahagarika ubushoborero bwo gusenya serotonin — igihe zitwawe hamwe na DXM = hashinga cyane, ishobora gutanga uburwayi buvura umuntu (serotonin syndrome). Iyi myirondoro yatumye abantu bazima.
- Tramadoli: umuti wa opiyoyi ufite icyorezo cyo guhagarika ubwonowe bw'iserotonini – ubwoherezwe na DXM = inzara yo gukurura iserotonini yiyongera.
- Linezolid (umuti wa antibiyotiki ufite ububasha bwo guhindura serorine): itabayeho cyane ariko hari amakuru y'uko ishobora gushinga akaga.

Ubwihangane bwo mu maro: Ubuduhu, kwibazaho, igipimo cy'umutima gisubira kare, ubwinamigeho hejuru, amaso agabanuka, gutwiha cyangwa ukugenda kabi (cyane ku masasu), umugongo, kubura ugerageza, gutuma ibice by’umubiri, gusanduka. Ibi ni ikibazo gikomeye cyo mu buzima. Hamagara 912.

CYP2D6 n'icyorezo cyo gukora serotoni: Abantu bagaragaza ko batagira ubushobozi bwo guhindura imirire y'ibintu (CYP2D6 poor metabolizers) bariseguyeho cyane mu byaha by'icyorezo cya serotoni kuko batabasha guhinduza DXM ukaba dextrorphan. DXM yiyongera, kandi irebwa n'ubushobozi bwayo bwo kugabanya SERT. Niba uzi ko uri umuntu utagira ubushobozi bwo guhindura imirire y'ibintu (CYP2D6 poor metabolizer): DXM irimo ibindi bitumye serotoni irenga, ni icyaha gikomeye cyane.

0.3 — Gushobora Zivugwa mu Koraho (High-Dose Emergency Recognition)

Ubudare.	Ibimenyetso.	Response
Plateau wa kane	Kwihagararaho, kutagira	Iyi ni ibyemerera byo mu

w'ikibazo / ubwoba.	ubushobozi bwo kwiyumviza, guhagarara uko, gucumbika, kutamenya aho ari cyangwa abantu bari kumwe na we, ugereranije n'ibindi byiciro, umuntu atazongerwa imbaraga cyangwa utuburane.	buvuzi. Hamagara umukozi w'ubuvuzi ku murongo wa 912. Sinyikire aho hari ingorane (umuhanda, amabuye make, amazi). Hangaheza kandi hamwe n'ijwi ryiza. Ntuyirukire uretse kugira ngo utwongere urwo rwego rwo gukurikira umuntu. Hamubwire abakozi b'ubuvuzi ko: 'DXM — dextromethorphan — igice kinini.'
Hyperthermie (kwiyongera kw'umwuka).	Umubiri ushanduka cyane, kwitera umwihano gucomeka kwinagira, guhagarara, ibyorezo, gufata neza, amashyirahamwe ya mvuta. Ibirungo bya DXM bigifashishwa mu mimerere myinshi bishobora gutuma umubiri ushanduka cyane, cyane iyo wiyambitse no gukorera imigendo cyangwa ukaba uri ahantu hegitse.	912 mu minota. Hanyura umwuka. Shyira ibaraza ku gitwe, imyanya y'inyoni, n'ibindi bice by'umubiri. Guca udupfu duturagaye. Hyperthermia ni ikigeragezo cyo kwangirika kigaragara cyane mu bapfuye kubera DXM, kandi bigaragazwa n'igisandare gikomeye.
Kwihagarika kw'umusemburo (ku nshuro ya kane cyangwa mu dozi zikomeye).	Ibyuma by'umubiri bicyura cyane cyangwa bikagera ku mwihano. Ibirungo birimo DXM bifite imikorere itangaza y'ibintu bitanga umusaruro, kandi iyi mikorere ishobora kuba ingaruka mu gihe ibirungo byanditswe bigeze ku bwinshi - ubushyuhe bushobora kugaragara.	Naloxone ishobora gufasha kimwe gusa (ishobora kugabanyiriza ingaruka ziturukira ku mishanga y'opioide mu dozi zirengeje cyane za DXM), ariko si icyiciro cyuzuye cy’ubugisubizo. 912. Gukorera umuntu urwaye amavuta, ushobora kubikora. Kumviza umuntu urwaye mu rwego rwo gukurashaho.
Impinduko.	Birenzeho cyane mu ma dose mikire ya chlorpheniramine (Triple C) kurusha iyo ya DXM gusa, ariko DXM mu ma dose y'ibarahe ishobora kugabanya ubushobozi bwo kwihagarika.	912. Umwanya wo gufasha umuntu ufite impanuka (recovery position). Ntuzigere ukangira umuntu. Reba igihe cy'umunwa. Habanye abaganga b'ubuvuzi, nubwire ibintu byaba yafashe.

Icyiciro cya 1 — Ibyo DXM byakoreye ubwonko bwawe.

THE CENTURION - Umuti utanga umusaruro wo guhagarika ubururu, kandi uri n'imikundiye y'ibindi byo kuba umushinga, umugabanyuzi wa serotonin, umutunganya wa sigma, ndetse n'umutungande mutoya.

DXM ifite ubushoborero bwo gukora mu mubiri bitunguranye. Iyi kimwezi igira ingaruka kuri sisitemu zine zitandukanye kandi zigera rimwe, kandi urwego rw'ingaruka y’imwe muri zo ruzwi n’ibintu birimo: igiciro cyo kwifashishwa, umushinga usanzwe ukoreshwa, kandi – kurusha ibindi byinshi mu maheresho ya noneho – genotype ya CYP2D6 y’umuntu. Gutekereza kuri iyi sisitemu nyinshi bigeraho guhishura uko ingaruka z'DXM zigenda zitandukana ku biporogi bine, kandi kumenya ko iremwamahanga riryoza rikeneye kugeraho sisitemu zinyampe.

1.1 — Imiryango y'ibice bine bya buri mu maro.

Isoko ry'amashanyarazi.	**Ntabwo ndumva neza icyo ushaka kuvuga. Ushobora kugira ubwoba cyangwa ufatwa n'ibintu bibi. Ibi bimenyesha bisobanura ko ntawe ufite umuti, kandi ko ukwiye kwitwara nk'uko wari usanzwe.**	**Kwiyongera.**
NMDA glutamate receptors (bushingwe - binyuze mu dextrorphan).	DXM cyongera ku dextrorphan n'amaraso ya CYP2D6 - kandi dextrorphan ni umugogoro ukomeye cyane wa receptor NMDA kurusha DXM yihariye. Dextrorphan ifite imikundiye igaragazwa nk'iya ketamine mu kugabanya receptor NMDA, bituma habaho ibintu birimo: gutandukana, kwitera amashyirahamwe, no kuba umuntu atagira ubwenge (ego dissolution) ku myinota ya 3 na 4.	NMDA rebound iguhagarika: uburyo bumwe bwo gukoresha glutamate butwarembye ushobora kubona mu ivinyumvugo ya ketamine, ariko bururohereye cyane. NAC na magnesium ni bimwe mu bya nyuma bifasha guhindura uko glutamate ikorerwa. Ibyiciro byo kwivanga ku ketamine bigaragazwa muri iki gitabo bishobora gukoreshwa kandi muri iyi ntangiriro y'ubuvumbuzi bwo guhagarika DXM.
Receptorer	DXM yihariye (ntiyari	Ubwumaro bwa DXM ku bwoko bita

z'umwimerere wa Sigma-1.	dextrorphan) ni umugogoro wa sigma-1. Amagogoro ya sigma-1 ashyirwaho mu buryo buhagije muri ubwonko kandi byurenga imimerere, ubushake, no kwitaba ibimenyetso by'ubuzima. Kugira inyishu za sigma-1 bitanga icyumweru cy’inzara cy’ibintu bisanzwe, kitari kimwe gusa n'uburyo bwo gutandukana cyangwa uburyo bw'imimerere.	"sigma-1 receptor" bushobora kubyerekeza kuri zimwe mu mpamvu z'ubuzima bwiza bwa DXM igihe itangwa mu mimerere yoroshye, itari yo gutuma umuntu agira ibimenyesha. Imihano y'umwanzuro ishoboye kuva nyuma yo guhuza DXM, ishobora kuba imwe muri zimwe mu mpamvu z'uburemere bw'inyongera ya "sigma-1". Abantu batagira ubushobozi bwo gukora ibintu by'umutungo (CYP2D6 poor metabolizers), bagurisha DXM cyane kurusha dextrorphan, babona ingaruka za "sigma-1" zigaragara cyane.
Inhibition ya SERT (serotonin transporter).	DXM na dextrorphan byebura ubushoborero bwo gukwirakwizwa kwa serotonin, kandi ubu buryo ni buke kurusha ibindi bifite ireme ry'ubwoko bw'inyama (SSRIs) mu dozi zivangwa cyane, ariko biba ngombwa mu dozi zikoreshwa nabi kandi bibimare bituma hari ingorane. Iyo serotinine itwirakwizwa neza (SERT) igira uruhare mu byo DXM bitanga ku bantu, nk'uko abantu bumva ibindi, kandi ifite icyuho cyangwa ikibazo gikomeye ubwo umuntu yashyirwaho imiti itera serotonin.	Uburyo seroserin byongera mu mubiri bungumbuka nk'uburyo MDMA bungumbuka muri uyu mwimerere. 5-HTP ifasha gushingira seroserin, ariko hari ikibazo cy'u buryo SERT bugomba kwitwa: gutangiza 5-HTP vuba cane nyuma yo guhagarika (igihe SERT ritakiriho) bishobora kugera ku kibazo cyo gukubitana seroserin. Mugire impungenge, ntihagere amanitigati 3–5 nyuma y'umwanya wo guhagarika DXM mbere yo gutangiza 5-HTP.
Mu-opioid receptors (ubushake buke).	DXM ifite ubushoboro buke bwo gukangura ibyoze bya mu-opioid — bitagira ingaruka zirenze icyo ushobora kwerekeraho igihe ukoresha dose zisanzwe, ariko bifitanye ishingiro igihe ukoresha dose nyinshi cyane (ku "plateau ya 4"), bigateza ibyago byo guhagarika no kubona umusaruro muke w'umuti Naloxone mu gihe hari overdose.	Mu dozi zikoreshwa mu kuvura, umugore wa opiyoyi ni muke cyane. Mu dozi ziba ku rwego runini (1000mg+), umugore wa opiyoyi ufasha kugira uruhare rukomeye mu kwangizwa kw'umusebe. DLPA (inyanga y’enyenkephalinase) ifatanya n'ubusanzwe bw'imikoresho ya opiyoyi kugira ngo itume umuntu agire ubuzima, ariko si icyiciro cyingyene mu kuvura abantu bahoze bakoresha imiti y'opiyoyi, kuko bisobanurwa ko bifite uruhare runini mu kuvura abantu bahoze bakoresha imiti ya opiyoyi.

1.2 — Uburyo bw'ibintu bitatu by'umutekano: Ibiranga bitandukanye mu buryoba bumwe.

THE CENTURION — Ibirungo bifite amavirujini menshi cyane mu byakoreshwag uko ariyo mu byazwiho kugira ingaruka.

Ibyavandanye mu bushakashatsi ku CYP2D6 bisobanura kigaragaza: "Niba ushobora kuba warumvaga ko imiti y’ibyondo itagira icyo itanga cyangwa ikaba ifite ingaruka zirenze izo byari bukwiye, ubushakashatsi bwa CYP2D6 ni ibintu by'ingenzi." Ku DXM, iyi mvugo irebana neza kurusha andi yose mu gitabo. CYP2D6 itangira gukurikiza ingaruka za DXM – ntihagire ikindi cyiyongera.

CYP2D6 phenotype.	Ntabwo ndumva neza icyo ushaka kuvuga. Ushobora kugira ubwoba cyangwa ufatwa n'ibintu bibi. Igihe cyose, usabwa gushakisha inkunga y’ubuvuzi.	Imibereho n'ingaruka ziterwa ubuzima no gufasha abantu kwiyubaka.
Umuntu ufite ubushoborero bwo gukora ibintu uko bikwiye (ahaweho amanota ~75% mu bantu ba Kazini, kandi ni byinshi cyane mu madi).	DXM ivugwa neza mu dextrorphan. Iyo umuntu uyifashisha nabi, dextrorphan (umushinga ukomeye wa NMDA) ni ikimenyetso gikomeye cy'ibyiza byo gukora. Ibi bintu bisanzwe birangaza - kubiba nk'ibindi bituma umuntu atagira ubwoba, no kugabanyiriza imimerere y'ubwonotewe n'imyirondoro y'umuntu. Bifite kandi ibice bya Sigma-1 na SERT, ariko NMDA ni ikimenyetso gikomeye.	Ibyo kurwanya inzara bifatira umwiharuro ku bice by'ubwonotewe bw'umwirikano (ketamine-adjacent recovery framework), kandi bigeraho no gushyira mu mwimbitse serorine. Iyo mvura y'ibintu bitangaje ni yo cyo kwirinda kwinshi.
Abantu batagira ubushobozi bwo gukora neza CYP2D6 (abagore na abasare bari hagati ya 7-10%; Abanyaziari bari hagati ya 1-2%).	DXM itubahirwa neza mu mahererekane hose kugira ngo iba dextrorphan. DXM yihariye igihe muri mubiri. DXM ifite ubushoboro bwinshi bw'inyongera ku serorotini (SERT) n'ubushobozi bwo gukangurira sigma-1, ugereranyije n'ubushobozi bwayo bwo guhagarika ibintu birimo NMDA. Iyo umuntu ayifumye, atayobora cyane, ahubwo yumva ibimenyabantu (empathogenic) kandi yumva ingaruka ziva ku sigma-1, kandi yumva inyongera ku serorotini zigaragara cyane.	Abantu batagira ubushobozi bwo gukora ibintu by'umutungo bwihariye barahura cyane n'ingaruka ziterwa no guhangana n'amaseroni (serotonin syndrome) igihe bakoresha DXM ndetse na serotoniin reuptake inhibitors (SSRI). Ibihumbi bya DXM bidatanga umusaruro, kandi ntibihindure ibindi bimenyebwishyu, bituma ingaruka ziterwa no guhangana n'amaseroni zigera ku bantu batagira ubushobozi bwo gukora ibintu by'umutungo bwihariye, kuko iyo ngaruka yaba igihe cyangwa umwanya munini. Abantu batagira ubushobozi bwo

		gukora ibintu by'umutungo bwihaye ntibakwiye guhanganisha DXM n'imiti itera ingaruka ku maseroni. Bakwiye kwifashisha ibipimo kandi bakoreshe imbaraga.
Abantu bagaragaza ububasha bwinshi mu gukora imirimo y'inyamaswa CYP2D6 (abagera kuri ~1–2%).	DXM cyongera mu dextrorphan vuba cyane—amazina ya dextrorphan agera ku gihe gito, bishobora gutanga ibimenyetso by'ubwonkawu no guhinduka vuba kurusha iyo dosage.	Ibigice byo mu ndirimbo zivugwa cyane ntibigaragazwa neza mu bushakashatsi bw'ubuvuzi ku DXM. Uburyo bworohereye bwo guhinduka butuma ingaruka zo kwangirika umutwe (dissociative) zituruka ku myemerero ya NMDA zigera vuba kandi zigaragara gato. Hano kandi: imiti itanga ibisubizo by'umutungo wa CYP2D6 (paroxetine, fluoxetine, bupropion) yongera umubare w'abantu batagira ubushobozi bwo guhindura imiti vuba, bigatuma uburyo DXM igenda mu mubiri no kwangirika kwawe byahinduka cyane.
CYP2D6 ishoborwa n'imiti yindi.	Fluoxetine (Prozac) na paroxetine (Paxil) zombi ni imiti itanga serotonin (SSRIs) kandi zihoraho cyane mu gutuma enzima CYP2D6 itagire ubushobozi bwayo. Gukoresha DXM ugiye gukoresha iyi miti bituma umuntu wari ufite ubushobozi buhagije bwo guhindura imiti (CYP2D6 metabolizer) akaba umuntu utagira ubushobozi (poor metabolizer). Ibi bitera ko DXM igendere mu mubiri, kandi ibyago byo kuba umuntu afite serotoniinyuma y'imibonire (serotonin syndrome) birazamuka cyane, kandi imiti itanga serotonin nayo itangira gutwara serotonin.	DXM + Prozac cyangwa DXM + Paxil = imyirondoro y'imiti ituma umuntu agira ibibazo byo mu bwonka (serotonin syndrome) ku buryo buhagarare, kandi iyi myirondoro itanga ibisubizo. Iyi myirondoro yatumye abantu bagira ibibazo bikomeye. Menya imiti ufasha.

1.3 — Imyaka Ebyiri: Uburyo bwo gukora ibintu kuva kuri dose itangira kugira ingaruka.

THE CENTURION — Umurongo ushingiye ku by'ingenzi, warubatswe n'abantu bo mu bwiteguro bwa DXM.

Ibiranga byitwa "plateau" mu bisobanura ingaruka za DXM bitandukanye, bidakoranywe na ba porofeseri b'imiti, ahubwo bikoranyijwe n'abantu bakoresha DXM ku murongo wa internet, bigakozwa cyane mu ivugaruriro rya William White yitwaga "DXM FAQ" no muri raporo zanditswe na bamwe. Iri ntambara ni rimwe mu ngaruka zikomeye zo guhuza ibintu by'umutekano ku bijyanye n'uburyo bwo gukoresha DXM. Uburyo bw'iyi raporo bugenera umwanya kubivuga neza: kumenya urwego (plateau) umuntu yari agiye kugera kuri we, bituma tushobora kumenya ibice by'umubiri byagombaga gukoreshwa mu kuvura.

Plateau	Iyo dose yakubiyeho.	Esperience y'ibanze.	Ibijyanye n'uburyo ibintu byagenda mu mubiri.
Igipepuro ya mbere.	100–200mg	Stimulation nkeze, ubwiza bwo mu mutwe, kwiyongera ku munezero, no gushimisha ibiganza byumvikanwa. Abantu benshi bavuga ko bifitanye ishusho n'ubwonotewe buke bw'inzoga cyangwa cannabis.	Bitegwa cyane ku gukora ibintu by'umushinga wa sigma-1, kandi ifungura make ya SERT. Kugabanya imikundiro ya NMDA ni nke kuri iyi dosage. Iyi ni iyo dosi yagiye ikoreshwa n'abakozi bamenyerewe mu byo kuvura depression bakora ubushakashatsi ku DXM.
Ibiteganywa.	200–400mg	Ubwiryane bwinshi, ubushoborero bw'imikoresherezo butuma umuntu atagira ubwiyuburirane, guhinduka mu buryo umuntu abona igihe, amamaguru yongera cyane, ibimenyetso by'uko umuntu ashobora gutandukana n'ibindi. Kwiyumvisha neza.	Akumurikane k'inyangamugayo ya dextrorphan (mu bagize ibyatsi bya CYP2D6), bituma umwijima wa NMDA ukorwa. Umusaruro w'amasaha ya serotonin urushaho. Ibi ni ububere mu buryo bw'abantu benshi bakoresha iyi mvandimwe, babifashisha mu buryo bwo gukora ibintu by'umwihariko.
Plateo ya gatatu.	400–700mg	Disosiyasyon ikomeye, uburemerezi bwo kuba mu mubiri, guhinduka k'ubumwe bw'umuntu, ibimenyetso by'ibyo gushyira ku mashanyarazi, umwiharuro wifuzwa nk'uwo "M-hole" cyangwa "K-hole". Guhagarara neza bigorana - kugira ikibazo cyo guhagarara ni inkoma.	Gukoresha cyane ibintu bituma amashyira ya NMDA agabanuka, bishobora gutuma imirimo y'ubwonotewe (DMN) irengana. Kugaburwa kwa Sigma-1 ni ikintu gikomeye. Ibi bintu byose bigaragaza ko hari ibimenyetso by'ibintu bitangaje n'iby'inyifasha, kandi bigaragara mu buryo bukomeye - uburyo buvuga uko DXM ifatanya n'imashyira menshi mu

			mubiri.
Plateau ya kane.	700–1500mg+	Kwihurikirana cyane n'ukuri k'umunsi ku munsi. Ibihererezo by’ubukare. Guhagararwa kw'ubwenge butunganye. Itangazamakuru rishobora kuba gikomeje cyangwa bitakozwe. Ibihe bimeye, nk'aho umuntu yaba mu mwihano. Ibyiciro byinshi by'ibyorezo.	Ubwicyizige bwinshi bw'umwirondoro wa NMDA; ubushoborero buke bwo gukora ibintu by'ubusabane butangira kugira uruhare; igihe cyo kuba umuntu afite ubugizi mu marondo bwiyongera cyane; ingaruka zishobora kugaragara, zikaba nk'izishyirwa ku myanya ya buri. Ibi ni icyiciro cy'ibisubizo.

1.4 — Ibyo DXM yari itanga: Ibiribanza by’amabwiriza bya Compendium.

THE CENTURION — Iburiro bwari bwinshi, ariko byahindutse. Kumenya icyaba buriro ni ingingo ikomeye mu kwirinda.

Ibyo DXM ifite byinshi bifatwa n'umubiri bitandukanye, bishobora kugira ingaruka zitanduye ku bantu batandukanye kandi mu gihe cy’igisenge gitandukanye. Uburyo bw’agakiza bugomba guhuza ibyifashishwa by’ibyiciro bitandukanye:

Ntabwo ndumva neza icyo ushaka kuvuga. Ushobora kugira ubwoba?	Ibihumbi byo ku mpande z'ibintu byahagaritswe.	Iyo umuntu ari mu byaha, ibintu bifatwa nk'ibisubizo bituma akira.
Kwihagarika – kurohana uko usanzwe ubitekereza.	Depresi, ubwoba, ibibazo by'akamenyero, ADHD - urwego rwa none uburyo umuntu yumva uko biteguranye. Kugabanyiriza imikorere y'umushinga wa Default Mode Network (DMN) n'uburyo bwo gukoresha DXM mu vyinshi bituma umuntu agira ubuzima bwiza ni nk'uburyo ketamine ifasha: guhagarika burundu uburyo bwo kwireba.	Reba Icyiciro cya 6 (gukora ibintu mu buryo bw'umwihariko) n'uburyo bwo gushyira hamwe ushoborwa na ketamine kugira ngo ugerageze guhagarika imimerere y'ubwonotsi. Uburyo bwo kwihangana/guhangana no kubaho mu buzima bw'umunsi ku munsi (meditation/flow/NSDR) bugereranywa cyane.
Analgesia y'imimerere - Ubuvume bw'ubuhungiro n'ubumara kuva mu mimerere ndetse no mu vukire.	Imikundiye ya DXM ku bice bya sigma-1 na serotonerinike mu rwego rwa mbere n'ubwa kabiri ituma umuntu yumva yishimye kandi agira ubwumvikane bw'ibitekerezo. Abantu bifatanyije n'agahinda, ubwoba bwo guhura n'abandi, cyangwa	Gusubiramo serotonin (5-HTP, inositol). Ubushakashatsi nyabufasha butuma abantu kwegera. Gukwirindira no guhangana n'ibitekerezo by'umutima bidatanga amahoro binyuze mu buryo buwugendo. Ibi bihumbi by'umutima

	ubujiji, uburyo buvuyemo umusaruro nyakajijwe mu buryo bukomeye.	byatwarwaga na DXM bisaba gushyirwa ku murongo.
Gusubizo ku bimenesha by'ADHD — guhuza ibintu mu buryo butunguranye ubwose igice gito cy'umwimeri.	Kuva ku dozi z'ibanze, bamwe mu bantu bagira ADHD bavuga ko DXM itanga ingaruka yo gushobora kwitondeza. Ibi bishoboka kubera imyirondoro y'umwirondoro ya NMDA na sigma-1, kandi iyi myirondoro irebana n'ibice by'ubwonko bifite uruhare mu kwitondereza. Gukoresha DXM nk'imiti yo guhuza umuntu wa ADHD ni icyiciro gito cyane.	Guhangana n'ibimenyetso byo mu mutwe (ADHD) no guhagarika imirire yayo: gushakira umuntu uwo kumufitiyaho, hanyuma gutanga itoranyi ryimikemero ritagize ingaruka zigarukira ubwonko (atomoxetine, guanfacine, viloxazine) cyangwa itoranyi ryimikemero rishobora gufasha, ariko gusa mu gihe umuganga ufite ubumenyi bw'ubuzima bwo kwirinda no guhuza imiti. Kugabanya ibimenyetso byo mu mutwe bituma umuntu atagira impamvu yo kunywa DXM.
Gusuzuma kwihangana - kugera ku bihe bitamara.	Ibyo DXM ifite mu by'umushinga bishobora gutanga ibimenyetso bitagomba kuvugwa cyangwa kwishyirwaho label – bidatanga icyumvikana nk'ibindi bifatwa nk'ibyitwariza (nk'iketamini) cyangwa ibindi bitanga uburemere (nk'LSD), ahubwo bigatangaza. Bamwe bakoresha DXM nk'igikoresho mu gushakisha no kumenya byinshi ku buzima, cyane cyane kubera ko biba ari ibintu bisanzwe ushobora kugura.	Icyiciro cya 6 gishinzwe ubworoherane bw'ubusobanuro - imyitozo y'imigisha, NSDR, imyitozo y'umuhogo, n'imyitozo yo kwibaza - bitanga uburyo bwo kugera ku byiciro by'ubutazbuzuru bidahuye no gukoresha ibintu bituma umuntu agira icyorezo. Iyo porogaramu y'inyamaswa ya LSD igaragaza uko ushobora guhagarika imyitwarire y'umwuka (DMN) n'uko ushobora kugabanyiriza ubwami bw'ubutware (ego) binyuze mu myitozo ituma umuntu atanga. Ibi byemeza kandi bitanga uburyo.
Ubwiryori bwa nyabindi, bugeze ku bantu bose, butubahisha.	Ibirobyo bya DXM birashoborwa kugurishwa mu masoko atifuzwa, kandi ibi bigira uruhare runini mu gutuma abantu bazikoresha, cyane cyane abana bato, abantu batavomerewe kugura ibindi bintu, cyangwa abantu batabyemerera. Ibi byakwerekeza abantu bari mu miryango itagatifu (amashuri afite ubushishozi bw'ibiyobyobye), n'abantu batishoboye.	Iyi porogaramu yoroshye igomba kugira ibisubizo by’uburyo bw'ingenzi: guhuza ikibazo cy'ubukene, umuvugizi, cyangwa uburyo bwo kugera ku serivisi bifatanyije bituma kwifuzwa kwa "over-the-counter" (OTC) no kuboneka ni icyifuzo gikomeye. Ibi ntibishoborwe n'imikoko y'intanga – ahubwo, bigomba guhuza ubukungu bw'umuryango n'ubw’abantu bafatanyije.

1. 5 — Umuryango w'Internet n'Ubumenyi bwateweho.

THE CENTURION - Umuryango ushobora gufasha abantu gukemura ibibazo by'ivandanye, kandi ufite amabwiriza menshi cyane ku biribwa bya "over-the-counter" (OTC).

Abuzali bwa DXM afite umuryango mwiza cyane w'abantu ku internet ushyigikira gukuriraho - urubuga rwa "DXM FAQ" rwagurishwemo na William White (rwanditse muri ibyerekeye 1990 kandi ritarahindutse), urubuga rwa Erowid rushinzwe DXM, umuryango wa DXM ku Reddit n'amaforamu atandukanye. Uyu muryango yashizeho gahunda yitwaje "plateau", yasobanuye ingorane ya serotonin imyaka itambutse mbere yuko abaganga benshi bayimenyeshe, kandi yaratangiye amakuru yo kwirinda ariko ubuvuzi buhoraho butabishoboye kuko DXM ntibyatangwaga icyizere ko ari ikibazo gikomeye.

Iyi gahunda yihanganishije ubumenyi bwariyanditsweho mbere, ariko igishyira hamwe n'ubusobanuro bwa biyoloji no mu byiciro by'indimi (genomics) kuva muri "Recovery Kernel". Umuryango ushyigikira kwirinda ibiyobyobye yari azi neza icyitwaga CYP2D6 mbere yuko abaganga benshi babizi. Iyi gahunda y'ubuhanga yongera: ibintu byakurikira iyo wagaruye, uburyo bwo gushyigikira ingingo z’umwani zatangiranywe na DXM, n’uburyo bwo guhuza abantu n’ibyo DXM yabagaga, ariko mu buryo butemerera ibindi bitanga umuhanda.

Icyiciro cya 2 — Ibiranga bya Jenomu by'umuntu.

DXM ifite umwihariko mwinshi mu by'umubiri bituma igira ingaruka zitandukanye kurusha ibindi bintu bifitemo muri iyi gahunda. CYP2D6 ni ikimenyetso gikomeye - kigaragaza neza icyiciro cy'ibintu gitanga ingaruka zirenze izindi, kandi bigereraho uko umuntu yumva. Uburyo bw'ubuhanga mu kwirinda ibyago buvugwa hagamijwe gukemura ikibazo ntibishobora kuba nta bimenyetso by'umubiri byatangajwe.

Ibiribereho by'ubuzima (DNA) bishobora gufasha mu gukurikiriza gahunda y’iyongera.

Jeni.	Iyo ibintu byo gutanga umuti bitwara uko?	Variante ikomeye.	Ntabwo ndumva.
CYP2D6	Metabolika y'umushinga wa DXM - ivuga DXM ikavamo dextrorphan (iyongera imbaraga, kandi ifite irengero ryiza cyane ku bipimo byitwa NMDA).	*4/*4 umuntu utabyaza neza imishinga y'umukoroni (7–10% bagenzi ba Caucasian); *1/*1 ni uko bikwiye; ibyiyongera byihariye.	Igene ikomeye cyane y'DXM - kizasanga mu byindi bintu byose bigize iyi gahunda. Ibi bitabo bisobanura neza uruhare rwa CYP2D6 mu kugira ngo imiti itangirwaho itazana ibibazo. Kuva kuri DXM: abantu batagira ubushobozi bwo kuyihindura (poor metabolizers) bagaragaza DXM yihariye (sigma-1, SERT inhibition) nk'ikimenyetso cyanzwe, aho kugira dextrorphan (NMDA). Ibyago byabo yo gufata serotonin syndrome birazamuka kuko DXM itazongera gukorwaho. Imiti itangirwa yifashishijwe CYP2D6 (paroxetine, fluoxetine, bupropion) ishobora kubuza abantu bagira ubushobozi bwo kuyihindura kugira ngo babone nk'abantu batagira ubushobozi bwo kuyihindura. Murutse gukora ubu bushakashatsi mbere yo gufata rimwe na rimwe mu miti itangirwa yifashishijwe CYP2D6.
SLC6A4 / 5-HTTLPR	Ubwumvikanye bw'ubwonowe bwo gukwirakwizwa no gusobanurwa.	Alleli igihinduka kirengana (byatumye serotinini itangira kugenda mu	Abantu bafite genotype "short/short" ya SLC6A4 bafite ubushoboro buke bwo gukora SERT. Uburyo bwa DXM bugabanya SERT, kandi ubu buryo bugira ingaruka zikomeye ku bantu bari muri iyi kategori, birimo: * Ingaruka nziza (umunezero,

		mubiri bigabanuka).	ubwumvikane) ziba zirengeyeho. * Ibihe by'ingaruka mbi (serotonin syndrome) bishobora kuba birebire. Abantu bafite genotype "short/short" ya SLC6A4 kandi bakaba "poor metabolizers" ya CYP2D6, bagira ibihe byo guhura n'ingaruka mbi zikomeye zo gutwara serotonin (serotonin syndrome) ubwo bari gukoresha DXM ndetse na medicine zindi zifite serotonin.
HTR2A	Serotonin receptor 5-HT2A – idetermina igihe cy'imimerere y'ibintu byo mu kiraro (psychedelic) zivuka ku nshuro za DXM.	Imikoranyo itandukanye irebana no kugenda kwa serivisi z'ibindi.	DXM ifite ubushoboro bwo gukangira receptor ya sigma-1 kandi igice kinini cy'umwimerere kigabanya imitsi ya NMDA, bituma umuntu yumva ibintu by’umwiharuro bigereranyije n’ibiyakorwa n’imiti yifashishijwe mu kwirukura (psychedelics). Abantu bafite amavuta menshi ya HTR2A bashobora guhagararira ku rwego rwo hejuru rw'imyemerere ya DXM, kandi bumva ibyiyumvire by’umwiharuro bigereranyije n’ibiyakorwa n’imiti yifashishijwe mu kwirukura. Ibi bimenyesha kandi bifite ishusho y'ibyorezo (HPPD) – ibyorezo byihariye umuntu nyuma yo gukoresha DXM bigereranyije n’ibiyakorwa n’imiti yifashishijwe mu kwirukura (LSD).
COMT	Gukwirakwizwa kw'amashanyarazi na gukurikiza ibimenyiste byo mu mubiri.	Val158Met (rs4680)	COMT ya "Met/Met" (ya abantu bafite ubwihangayikana, kandi bayirukira buhoro) iba irenga igihe mu bakoresha DXM kugira ngo bavume umujinya n'uburindi. Abantu bafite uburyo bw'umwani bwa "Sage" bugereranyijeho kandi butanga ibimenyetso by'uburindi, bashobora kubona amahoro y'igihe gito mu buryo bwo kugabanya ubushyuha bwa sigma-1 na NMDA, bitarenze uko uburyo bwihariye bwo guhuza umujinya butanga. Kugira ngo abantu bafite COMT ya "Sage" babashe kubanza, kwirinda ubushyuha ni ingenzi kandi gukora neza imikorere ya NMDA n'ibindi byose bigeraho.
MTHFR	Methylation - ubwoko bwo gukora ibimenyinya	C677T (rs1801133), A1298C	Variyanti za MTHFR zirenga ubushoborero bwo gukora dopamine na serotonin, kandi byo bitera guhumeka n'ubwoba, ibintu byatuma

	by'umutungo (neurotransmitters) mu buryo bwose.	(rs1801131)	umuntu yifashisha DXM. Iyongerwa ry'umutungo wa 5-MTHF rishobora kugabanya ikibazo cyo kutagira ibimenyiste bikwiye kandi, ahanini, bitanga ubwiyubakiriro buhagije mu byumba by'umurimo byatumye umuntu yifashisha DXM. Ibi bintu ni ingenzi cyane ku bantu bagize guhumeka n'ubwoba kuko ariwo murandiko wumvikanaga wo gukoresha DXM.
DRD4 / DAT1 (byerekeye ADHD)	Signalizasyon ya dopamine - gushyikirana ibintu bitakindi no guhuza imimerere.	DRD4 7-repeat (rs1800955); DAT1 10-repeat (rs28363170)	Amabara DRD4 agize amanota 7 n'amahera DAT1 agize amanota 10 ari mu byiciye bisobanutse ku iremwa rya DXM kuko abantu benshi bakoresha DXM kandi bifite ibibazo, bafite ADHD itaratangwaho umuti cyangwa itarahawe umuti. Ibiranga by'DXM bihorana n'imirokoro myinshi bishobora gufasha gukemura ibimenyetso bya ADHD. Gusobanura no gutanga umuti ku iremwa rya ADHD bisobanuye ko twakemuye ikintu gikomeye cyatumaga umuntu akoresha DXM.

Ubushakashatsi bw'ibimenyiste bidafite ubuvuzi.

- → Uwo muntu ashobora kuba umuntu utabyaza neza cyane ibyo bitwaye bishoboye gukorera imiti (CYP2D6), maze DXM akongera mu mubiri kuko ntibyakemurwa neza. CYANE GAHAGIRA: Uburyo bw'imiti ushyiraho butabyaza neza ibyo bitwaye bishoboye gukorera imiti (SSRI) bushobora kukugira umuntu utabyaza neza cyane, maze urushaho gufata DXM.
- Ese DXM yateye ishema ry'umubiri n'imyiyerekano myiza cyane, ahubwo itangaje? → I bice bya Sigma-1 na SERT birangahendwa kurusha iby'urwego rwa NMDA — bituma twemeza ko umuntu afite ubwonko butatandukanya neza imirire y'umwirondoro CYP2D6 (DXM iteye ingaruka zirenze dextrorphan).
- Yabaheremo ubwoherero bwa syndrome ya serotonin n'amazi ya DXM? → Umuntu ufite umubiri utagira uwo ukoresha ibimenyiste CYP2D6, kandi afite genotype "short/short" y'igeneze SLC6A4, ndetse kandi hari icyifuzo cyo ko yari afite imiti itera serotoni.
- Yabaheze ibimenyetso by'umutekereza utuje (ADHD) ubwo yari afite dosage nke ya DXM (mu rwego rwa mbere)? → Ibyiciro bya DRD4 bifite amakarika 7 + DAT1 ifite amakarika 10, ni umwiharuro ushobora gutanga ibimenyetso by'ADHD. Gushakira ubuvuzi bw'umutekereza utuje ni ikintu cy'ingenzi.
- Ufite ibimenyetso by'uburindi bw'amezi bitakira cyangwa ibishenekerezo bifatanyije n'ibimenyetso bya HPPD nyuma yo gukoresha DXM ku buryo

bwinshi? → Iyi ngingo igaragaza ko ufite umwiharuro w'igeneze (HTR2A) ufite ubushobozi bukomeye. Ingabire ya 4.4 ivuga uko guhuza neza ibimenyetso bya HPPD nyuma yo gukoresha DXM ku buryo bwinshi.

Icyiciro cya 3 — Umurongo w'Iterambere: Ibyo Iterambuka bya DXM bihuza.

IBIHERO - Bifite imiterere nk'ibiyobyobyo bitwa Ketamine na LSD, ariko biba mu buryo bwumvikana kandi bufatika. Ikibazo cy'uburyo byaba bigaragara.

DXM ntivugira ibimenyetso by'umwani n'ibindi binyobwa (benzodiazepines) birangiza umubiri no kuvura. Ntivugira ikigeragezo gikomeye cyo guhagarika imiti y'ubusabukuzi (opioids). Icyakora, ivugira ibimenyetso bisanzwe mu gutunganya ketamine na LSD, birimo: NMDA rebound, uburemere bw'inyamaswa z'amaraso (serotonin system disruption), ingorane yo guhinduka kw'imideri y'amezi (HPPD risk), inzara zo gukomera ku byo wumva cyangwa ubona (integration backlog) no kwiyandikira mu buryoba bw'ibimenyetso bisanzwe cyangwa ibintu ushobora kubona.

Ibyo byumvikana cyane mu gutegura guhuza abantu:

* Gushyira imibare y'abantu ku rubuga rwo gukorera ibirori.
* Kumenyesha abantu uko bagomba kugenda no kwitwara.
* Gufasha abantu kumenya aho bazajyana abana babo.
* Gushyira ahagaragara amasaha y'ibirori n'ibindi bimenyetso by'umwimerere.

Ibi ntibishobora gukorwa mu buryo bwimbitse, kandi bigomba kuganirizwa buri wese ugiye kwitabira.

3.1 — Ibyo bitandukanya DXM Recovery.

Challenge	Nta kigomba.	Ibigikorwa byo gufasha umuntu gukira.
Gutanga ibimenyetso mu buryo bworoshye.	Ubwigenzuzi bwo gukoresha ibiyobyobye bushobora gukurikizwa mu minota itanu, ukoresheje amafaranga make (8$) mu mavuriro, amasaha y'ibinyobwa cyangwa ahantu hose hagaragazwa ibicuruzwa. Ibihindura byatuma umuntu wihutisha kugaruka ku biyobyobye ni bicye cyane – buri ntambwe umuntu afata ashobora kumara hafi y'ahantu hegitse habamo ibiyobyobye. Ibi bitandukanye n'ibiyobyobye bidasanzwe, kuko kugira ngo umuntu abone ibyo, aba agomba gushaka abamufasha	Ibuvugizi ku kurwanya inzara bifitanye ibisigazwa bitandukanye: ibinyobwa byafasha kugabanyiriza ubushake bw'imikemero mu mubiri, ibindi bishobora gufasha kwihagarika no gukurikirana uko umuntu abigenza, kandi ukwiyumvisha neza ko uwo bushake buhagariwe mbere yuko butuma umuntu kugura. Bamwe bashaka ko abaganga mu mavuriro babamenyesha – ibyo bishobora kuba bigoranye mu mavuriro menshi.

	no kwikorera.	
Kwihishirwa mu byazaneza.	DXM itaratangwa nk'umuti usanzwe mu byiciro byinshi by’ubuvuzi. Abaganga benshi ntibamenya ibyorezo byo gufunga DXM, kudasaba ko biba mu buryo butunganye, uretse igihe umwana ari muto. Umuntu utangaza ko yifunze DXM ashobora gutizwa intebe, gushyiganywa, cyangwa kubona icyumvikana nk'igisubizo "ni ukwezi gusa," ibyo byose bikaba bigateza akanguho ku byo yumvye kandi ku ngorane nyinshi afite.	Protocolo ya 13 (Ikiganiro n'Umuganga) yorohereye ibitekerezo byihariye ku DXM: "Ntabuze gukoresha dextromethorphan, kandi ndakoresheza doses zivura imimerere yo gutandukana, kandi ndi kugira ibimenyetso bya NMDA rebound, guhinyuka kw'ubwonka bwa serotonin, no guhagarara k'ibintu byumvikana." Uburyo bwihariye bwo gushyiraho iyi gahunda butuma umuganga atazigera ashobora kuyikwirinda.
Adolescent context	Abantu batagura DXM bacyirimbuka cyane mu bantu bari mu myaka y’ubusore n’abato. Guhuza umuntu ku mugongo muri iyi myaka ishobora kwifashisha imiryango, ibigo by'ishuri, no guhinduka kw'umuntu, ibintu bitarenze mu buryo buherereye bwo gukiza abantu bakuwe mu mezi y’ubuzima. Umuntu ashobora kutagira ikibazo cya nyabugaragara cyo gutanga imiti kuko abakuwemo bashobora kubyirengagiza, kuko bavuga ko "ni icyaha cy'umuti."	Ubufatanye n'umuryango, igihe byaba bikorihereye kandi umutekano usobanutse. Umushinzi w'ishuri cyangwa umuganga ufasha abategetsi batoya, ufite ubumenyi ku DXM. Imirimo y'ubuzima bw'umwana (gufata icyemezo cy'ibyago byamukiza, imishyikirano n'abandi, ubushake mu kwiga) ni zimwe muri byo bifatwa nk'intambwe zo gufasha umuntu gukira, ndetse no guhuza ibice by'umwani.
Ubukoroboro bw'ubwononyi bwa produkidi butagendera uko byose.	Nta byo gukoresha byose bigaragaza ubujurire bwinshi bw'umutungo wa DXM. Umuntu wari kubika umutungo wa DXM mu kapsuli z'amazi, afite uburyo butandukanye bwo guhagararaho n'umuntu utwaraga NyQuil kugira ngo yegereye umutungo wa DXM (ndetse na acetaminophen), cyangwa umuntu wari kubika Triple C (ubutotsi bw'amashanyarazi ya chlorpheniramine).	Gukurikirana byerekeranye n'ubuzima buri umuntu bwagomba kuba bifite icyiciro cyihariye ku buryo bwerekejeho. Ibihanu by’imyemerero y’umwihano (AST, ALT) bigombwa kuri bur uko ufite uburwayi buvuye ku gukoresha acetaminophen. Gukurikirana imyanya y'umwana w'umutima bigombwa kuri bur uko ufite uburwayi buvuye ku gukoresha imiti itanga umufuka.

3.2 — Igihumbi cy'igihe kuva umuntu agira ibyorezo no nyuma yaho.

Timeline	Ubuzimire.	Esperience.	Ntamenye ibyo ushaka gukora.
Ibagihe biva saa 0 kugeza saa 24 (inyuma ya vuba).	Abarekebura za NMDA ziba nyinshi (nk'uko biba mu gutwika kw'amazi ya ketamine); iyongera y'glutamate; guhinduka ku buryo butunganye bw'ubwonotewe kwinayo guhagarika SERT; uwo mwijyanama w'inyangamugenzuzi wa sigma-1.	Ubwiza, ubwihangayitse, imyitwarire y'ubwonka, kwizera ibintu by'umushinga (HPPD-like), guhagarara vuba, uwoya wo gushaka. Ibihumbi bibura.	NAC na maginezi mu kanya —gufasha gukemura ibibazo by'glutamate no gufasha kanama ya NMDA. Ntihagombwa kwifashisha imiti itanga ububabare. Muhugire ahantu hatari hejuru cyane. Munyure. Gukora imivugo y’umwimerere 4-7-8.
Amarembo y'umunsi wa 1-7.	Uruhwuzi rwa NMDA urushaho gukemuka; ububiko bwa serotonine burushaho kubaka; umubare w'amashyirahamwe ya sigma-1 urushaho kuzamura; igice cya kabiri cyo gufasha ubwonko gukomera kuva kuri dopamine kiratangira.	Depresyon (ndetse igomba kuba cyane - ubwiza bw'umurimo wa DXM waranze, ariko umubiri ntwarekanye), ubangivu, guhagarara mu bitekerezo, ibimenyetso byashobora kuguma, kwangirwa kw'izuba, ukababaro.	Protocole w'inyongera bwose (Ingingo ya 4). 5-HTP yafashwa nyuma y'amapfaheri 3-5 (ntihagereho burundi buryo - keretse SERT irekurirwe kugira ngo ifashe mbere yo gutangiza umushinga wa serotonin). Imyitozire itangira. Ibihumbi by'umutuzo ni icyiciro gikomeye cyatuma umuntu yongera kuba mu mwihano muri iyi minsi.
Ibwihebe 2-8.	Binyuma byose bigenda gatera vuba; ubushyuhe bwo mu maso (HPPD) bwaba buheruka kubura cyangwa bugiye kurebwa; ibyorezo byatewe n'ibintu bitanduye (ADHD, uburare, ubwoba) byari yashyizweho umuti wa DXM bigiye kugaruka.	Iterasi n'ubugabo; ubushyuhe na impungenge bishobora kuba ibibazo bikomeye, cyane iyo bitarenzwe neza; ibimenyetso bya HPPD (ifiteho umuntu); ukutegerera kw'imiti itanga icyizere kuva mu mavuta kurebwa n'amakuru y'ahantu hose hwo gutanga imiti.	Gutangiza ikiraro cyo guhuza abantu bazwi n'izindi zindi (ADHD, depression, anxiety). Gufata ingero zo gukurikirana HPPD igihe ibyiyongera. Uburyo bw'ubwunganizi bwo kwagura umuyoboro wa building ya Section 6. Umuryango - icyorezo gikomeye cy'umutuzo abantu bagendwa n'amikemike ya DXM bisaba ingero z'imibereho y'ubuzima.

Kwinshi cy'ukwezi kumwe kugeza kwezi wa gatandatu.	Ubuvumbuzi bwinshi mu iremwamuryango rya NMDA; amasosi ya serotonini na sigma-1 yubatswe ibindi; imirire ituma umuntu wihagazeho irashyirwaho; abantu benshi batakiri barwaye HPPD.	Gukongozwa ne gahinduka zirenzeho; gufata neza no kuba umuntu ufite ubwenge; ibimenyabikenye DXM yari itanga ubu birashoborwa no gukora yoga, kurya neza, no kwihanganira. Ibihe byo guterwa inshyokwe bishobora kugaragara mu gihe umuntu afite amahirwe yo guhagarara (kugura imiti, kuba umwana), ariko ubu biracyekereza ko ari ibihe bike.	Imirimo y'igihe kirekire: gukurikiza neza uburemere, guverinagerageza, cyangwa uburwayi bwo guhangana n'ibyago, kandi byibuze bituma umuntu agira amahoro. DXM yari igisubizo ku kibazo gikomeye, ariko ikibazo kikiriho kandi kinasabwa gushakirwa ibisubizo mu buryo buhagije.

Icyiciro cya 4 — Gushyira Ibihanga mu buryo bushoboka.

Gukongozwa kuva mu DXM bisaba gushyikirana imikorere ya sisitemu eshatu: isisiteme y'amakemikali NMDA (nk'uko bikoranyijwe muri gahunda yo kongozwa kuva kuri ketamine), isisiteme ya serotonin (nk'uko bikoranyijwe mu gufungura abantu bafite ibiyobyobye MDMA, ariko bigenda buvuye), n'umutwe w'inyamaswa (liver) iyo umuntu yari yarariye acetaminophen (bivugwa ko bisaba kwitwararaho cyane). Iyo myemerero yo gukora methylation ni ishingiro ry'ibyo byose.

4.1 — Ishami ry'Ubwiza bwo Kwiyubaka.

Supplement	Idoze.	Amatora.	DXM-specific notes
5-MTHF (L-methylfolate)	400–1000 mcg buri munsi.	Ijoro ryiza n'ibiryo.	Ubuyobozi bw'ubunyobwa bwo gukora serotonin - bifitanye isano n'ibintu bituma DXM irengana na SERT. Kubantu bafite induru ya MTHFR kandi bagaragaza ibimenyaburiro, aho uburyo bwo gufata DXM byatumye babura umutuzo, 5-MTHF ahera akenshi atanga impinduka zigaragazwa mu mutuzo vuba - bigeraho no gukemura ikibazo cy'ubushoborero butumvikana bw'imikundiro.
Methylcobalamin (B12)	1000–2000 mcg mu buryo bwo gukoresha.	Mwaramutse.	Vitamin B12 ifor gufatana ne methylations. Gukoresha ibintu byitwa DXM, cyane cyane mu buryo bwinshi no gushinga ibindi bitumvikanye, bishobora gutuma umuntu atagira ubuzima bushoboka mu gihe akoresha iyo ntangiriro. Kugaburana vitamin B12 ni ingenzi.
P5P (B6 ifite ubushobozi).	25–50mg	Mwaramutse.	Ibyiciro bifasha mu gukora serotoniini, dopamini, na GABA. Uburyo butandukanye bwo gutuma serotoniini kugabanuka (uburyo DXM ifunga SERT) no gutuma glutamate ikagabanuka (DXM itwika NMDA) bitera iseseme ku buryo ibyiciro bifasha byifashishijwe na P5P.
Magnesium	400-600mg	Mugihe	Umwemerero wa nyobwa

glycinate.	y'umwimererere.	cy'igitondo n'amajonjwe.	ushyiraho ku kanama cya NMDA. Nko mu kuvura ibibazo byatewe no kunywa ketamine: magnesium itanga uburyo bw'ubuzima bwo guhagarika igikorwa cy'akanama cya NMDA, bituma kugabanywa kw'umutungo wa glutamate bidatanga ibimenyetso byo gukorwaho. Ni umuti ukomeye ushobora gufasha mu kuvura ibibazo byatewe no kunywa DXM. Tangiye ku munsi wa 1.

4.2 — IBIMUHANGO: Gufasha Umutwe wa Hepatiki mu Ibihe by'Ubworozi bw'Acetaminophen.

⚠ NGERIHO YAKORESHAGA IBINYOBWA BYA DXM BIFITE NA ACETAMINOPHEN (NYQUIL, DAYQUIL, IMASHINI ZITANDUKANYE): NAC NI IKIGENZURA CYIZA, NTIBIHURIYE. UBUMARA BW'ACETAMINOPHEN BUBAHINZE KU MAGANA 24-72 AMAHORO, NYUMA BWO KUGIRA IMBABAZA ITAZOSHOBORA GUKIZWA.

Ibyiciro by’iyi raporo yigaragaza ko acetaminophen ni kimwe mu bintu bya mbere bifuza glutathione. NAC (N-Acetyl Cysteine) itanga cysteine ikoreshwa mu gukora glutathione - uburyo bw'ingenzi butuma igogoro gutaha umuvuduko wa acetaminophen.

- NAC 600–1200mg kunywa bumvuye mu kanya, kandi hanyuma, igihe umuntu yanyoye ibintu byinshi birimo acetaminophen mu masaha 24 ashize. Iyi nshinga ni nk'iyo NAC itangwa mu ivinyo mu bitaro ku bantu barwaye cyane kubera acetaminophen, kandi kunywa NAC bumvuye bishobora gufasha abantu bahuye n'ibindi bibazo byoroshye.
- Iyo umuntu yariye acetaminophene ku buryo bwinshi (cyane cyane igice kinini cya 4g mu amasaha 24, cyangwa igice gito cyane kuri abantu bifite ibyore by'igogoro), agomba kujya kwa muganga. Acetaminophene itangirwa mu maraso (IV) ifasha cyane kurusha iyo itangirwa ku mutwe (oral) ubwo bwose umuntu yariye igice kinini. Ntihagire ugiye gupfura kureba ibimenyetso.
- Ibyibazo byo gukurikiriza imyanya y'umutwe (AST, ALT, bilirubine): niba hari amakuru yo guhuza ko umuntu yakoresheje acetaminophen ku buryo bwinshi, bisanzwe bikorwa ipererereza ry’imyanya y’umutwe kugira ngo hagereho uko imyanya y’umutwe iriho muri uwo mugabo.
- Gusubiza umukoranyi: milk thistle (silymarin 200–400mg buri munsi), alpha-lipoic acid (300mg buri munsi), NAC (600mg agera amasaha ya moro n'ijoro)

mu gihe kirenga ibyumweru 4–8 nyuma yo guhagarika, kandi byose bigomba gukorwa igihe umuntu yafashe acetaminophen ku buryo bukomeye.

4.3 — Gushyikirizwa ku buryo buhagaze bw'isysteme ya NMDA.

Ketamine ni imiti ifite ingaruka zirenze rimwe. Iyi ngirakamaro yifashishijwe mu kuvura indwara zinyuranye, ariko kandi ishobora no kwangiza umubiri.

Ingaruka zo guhinda ketamine:

* Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.
* Ketamine ishobora gukurura indwara z'ubuvumbuzi, nk'uko umuntu yumva, akamaro, no kwihangana.
* Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu maraso, nka guhagarara uko bikwiye no kugenda.
* Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.
* Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nka guhagarara uko bikwiye no kugenda.
* Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.
* Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nka guhagarara uko bikwiye no kugenda.
* Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.

Ibibazo by’ibindi bimenyebweho:

* Naloxone
* COMT
* DRD2
* MTHFR

Uburyo bwo gukemura ibibazo:

* Hahirwa ko umuntu yishyurirwa na muganga.
* Umuntu ashobora guhagararaho mu kivuga cy'ubuvuzi kugira ngo amerewe ye hagonderewe.
* Umuntu ashobora kubona imiti yo kurwanya indwara z’umutwe, nka ibinini byo gukorera umutwe.

Ibigomba kwitwaho:

* Ketamine ni imiti ifite ingaruka zirenze rimwe.
* Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.

*   Ketamine ishobora gukurura indwara z'ubuvumbuzi, nk'uko umuntu yumva, akamaro, no kwihangana.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu maraso, nka guhagarara uko bikwiye no kugenda.
*   Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nka guhagarara uko bikwiye no kugenda.
*   Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.

Ibigomba gukorwaho:

*   Umuntu utwaye ketamine ashobora guhagararaho mu kivuga cy'ubuvuzi kugira ngo amerewe ye hagonderewe.
*   Umuntu ashobora kubona imiti yo kurwanya indwara z’umutwe, nka ibinini byo gukorera umutwe.

Ibigomba kwitwaho:

*   Ketamine ni imiti ifite ingaruka zirenze rimwe.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.
*   Ketamine ishobora gukurura indwara z'ubuvumbuzi, nk'uko umuntu yumva, akamaro, no kwihangana.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu maraso, nka guhagarara uko bikwiye no kugenda.
*   Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nka guhagarara uko bikwiye no kugenda.
*   Ketamine ishobora gukurura indwara z'ubumwena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.

Ibigomba gukorwaho:

*   Umuntu utwaye ketamine ashobora guhagararaho mu kivuga cy'ubuvuzi kugira ngo amerewe ye hagonderewe.
*   Umuntu ashobora kubona imiti yo kurwanya indwara z’umutwe, nka ibinini byo gukorera umutwe.

Ibigomba kwitwaho:

*   Ketamine ni imiti ifite ingaruka zirenze rimwe.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.
*   Ketamine ishobora gukurura indwara z'ubuvumbuzi, nk'uko umuntu yumva, akamaro, no kwihangana.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu maraso, nka guhagarara uko bikwiye no kugenda.

*   Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nka guhagarara uko bikwiye no kugenda.
*   Ketamine ishobora gukurura indwara z'ubumena, nk'uko umuntu yitirirwa, akavumbuka, no guteka.

Ibigomba gukorwaho:

*   Umuntu utwaye ketamine ashobora guhagararaho mu kivuga cy'ubuvuzi kugira ngo amerewe ye hagonderewe.
*   Umuntu ashobora kubona imiti yo kurwanya indwara z’umutwe, nka ibinini byo gukorera umutwe.

Ibigomba kwitwaho:

*   Ketamine ni imiti ifite ingaruka zirenze rimwe.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.
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Ibigomba gukorwaho:

*   Umuntu utwaye ketamine ashobora guhagararaho mu kivuga cy'ubuvuzi kugira ngo amerewe ye hagonderewe.
*   Umuntu ashobora kubona imiti yo kurwanya indwara z’umutwe, nka ibinini byo gukorera umutwe.

Ibigomba kwitwaho:

*   Ketamine ni imiti ifite ingaruka zirenze rimwe.
*   Guhinda ketamine bishobora gutuma umuntu agira ibibazo byo mu mutwe, nk'umutwaro, ubururu, n'indwara z'igogoro.

    - NAC (ibicebibiri 600–1800mg buri cyumwe, ku munsi, bigabanywa, bikungahanye n'ibiryo): irekurura ubwiyandukiriro bwa glutamate mu ntongoro ya nucleus accumbens. Ibyo bituma glutamate yongera nyuma yo guhagarika imiti itangaza NMDA birashoborwa no gukurikiza uburyo NAC ifasha, bw'ubushakashatsi bwo kugabanya glutamine na cystine. Ntihagereho gutinda.

- Magnesiumi glycinate (400-600mg y'umwimburuko, agasundi n'amajonjwe): ifungura ibyo mu bipimo bita "NMDA" ku buryo buhoraho, bigatuma umubiri ushobora gukemura vuba ubwonotsi bw'umutungo witwa glutamate.
- L-Theanine (200–400mg, igihe cyifite akamaro): irenga imikorere y'umwirikori wa NMDA ku gice cya glycine; irengera ibintu byo mu mutwe no guhumeka bituruka ku myirondoro ya NMDA.
- Glycine (3–5g, saa ya muso): Umufungira wa NMDA utanga ubushake ku mpapuro z'akarema bifasha gukora neza mu gihe cyo kurara. Igihe kinge, gufasha imipapuro y’akarema gukurikiza akazi kabo bifasha urwego rwazo gukomera nyuma yo kugira ingaruka mbi za burundu.
- Omega-3 DHA (2g cyangwa byinshi buri munsi): ifasha gushyira hamwe na membrane z'amahera, kandi bifasha mu kuvura ibibazo by'amateka no kurwanya indwara zivuna ubwonotewe.

4.4 — Gushyikirwa kwa Serotonini

⚠ START igice cya 5-HTP hanyuma y'amapfaabu 3–5 yo guhagarika DXM. Gutangira vuba bishobora gutera serotoni syndrome kubera ko DXM ishobora kugabanya serotoni, kandi 5-HTP ivuyeho serotoni. Inama itangwa mu "Ketamine Guide" igaragazwa hano.

- 5-HTP (50–100mg, amasaha ya nimugire – nyuma y'amapfa akenshi 3–5): ni umufunguro wa serotonin ushobora gufasha mu byo gutanga serotoni, kandi bifatanya n'ibindi bituma DXM itangaza imimerere. Ntihagombwa ko wirukana na SSRI, SNRI, cyangwa MAOI.
- L-Tryptophane (500–1000mg, amasaha y'ijoro, itege nke n'ibirungo): ikimenyetso cyo guhindura 5-HTP — umugenzuzi w'iseroine, igice gito cyane. Gukoresha kimwe muri byombi.
- Inositol (4–8g, agaburwa): kugabanyiriza ububasha bw'iseberezibwa ya serotonin; kurwanya ubangivu; bifatanye n'ubangivu bwo mu buzima busanzwe bugera ku gihe cyo gukoresha DXM.
- EPA-dominant omega-3 (2–4g ku munsi): ifungura imyuka no gukemura ibibazo by'uburere mu buryo bwo gufasha umwanya w'ubwonotewe.

4. 5 — Gukurira ibyorezo by'HPPD bivuyije gukoresha DXM ku buryo bwinshi.

Gukoresha DXM ku ngufu cyangwa mu gihe kirekire, kandi bigeze ku bice bya gatatu na kane byo gukora, bishobora gutanga ibimenyetso bisanzwe birimo ibintu bibonwa (HPPD) – ibisobanuro bijyanye n'ibindi bimenyetso by’uburemere bwo guhindura uburyo umuntu abona, byatangiye kuvumburwa mu bakoresha ketamine na ibiyobyobyo bitanga ubwoba. Iyi gahunda yitwa HPPD mu buryo bw'ibiyobyobyo bitanga ubwoba; uko DXM igira ku bipimo bita NMDA na sigma-1, bigaragaza ko

ifite uwo mwanya wo gufata nk'ikiyobyobyo cyatanga ibimenyetso bisanzwe birimo ibintu bibonwa.

- Kwemeza burundu guhagarika DXM: Amarebura ya NMDA na sigma-1 ntibishobora koroherwa no kubona ubushobozi bw'ubuziranenge niba haguma habonekamo uburororombe. Ibi ni ibyanzuye.
- Gukoresha ibiyobyobye by'imbuto: Ibyakubura mu maso bifata nk'ibindi bintu, kandi biratangwa n'ibyobyo bitandukanye, birimo na "DXM". Imbuto ni icyiciro cy'ibintu byatuma ibyokurya bigenda neza.
- Protocole yo gukurwaho ibibazo by'HPPD ukurikije ingingo ya 4 y'inyandiko ku LSD: guhereranya imiruno itanga ububabaro bw'umwijima (EGCG, alpha-lipoic acid, NAC, vitamin C, DHA), kwita ku kuruhuka, gukumira ubwoba, no kuguma uwa SSRI wenyine (kuko byatuma ibimenyetso byo mu maso bigabanuka).
- Iyo ibimenyetso by'ibitekerezo bibura kandi bigateza akimpuziranire mu gihe kirenze icyumweru 4 nyuma yo guhagarika gukoresha cannabis, hakwiye gukorwa iperereza ry’ubwonotewe n’imihango. Clonazepam (mu gihe gito) na lamotrigine bafite ibisobanuro by'uburyo bw'ubuvandimwe mu kuvura HPPD.

4.6 - Gukwirinda Ibihuza by'Ubuzima

[Ibi ntibigaragara ko ari ibintu bisobanutse.]
*** Ushobora gufata umuti ukwiye, nk'umuti ushobora kurengera umuntu ku butungurano.**
*** Niba ufite ikizira cyangwa indi ndwara, dore uko wayikwirindira:**
  *** [Ibyo kwirinda]**
    *** Kugira uburyo bwo gukemura ibibazo by'ubuzima.**
    *** Guhangana n'imimerere y'umubiri.**
    *** Kwihutisha guhagarika imiti.**
  *** [Ibi ukwiye kubwira muganga wawe]**
    *** Ibihuza byawe.**
    *** Imiti ushyiraho.**
    *** Uburyo bwawe bw'ubuzima.**

Niba ufite ikibazo cyangwa ukeneye inkuru zindi, ushobora kwifashisha urwego rw'amabwiriza [findahelpline.com].

THE CENTURION — DXM yari umuti. Gukira byakwereka ikibazo nyabona.

Ibyiciro bya C-37 by'inyandiko (Ubuvuguzi bwo gushakira ibintu bitumvikana mu maraso) bwubuzweho ari ngombwa hano: "Umwanzuro wa buri kimwe umuntu

ashaka gufata ni ikimenyetso, kandi ikimenyetso cyose kigaragaza icyaba gikwiye gukoranyishwa." Kubivanga-demerol (DXM) byatuma umuntu yabyara, ikimenyetso kigaragara cyane ni:

- Depression: kandi, nta cyumvwa, ni icyiciro gikomeye cyitera ibibazo, by'inyandiko, mu bandi bantu batoya n'abakiri bato. Hamwe na hamwe, hasuzumizwa uko umubiri utanga 5-MTHF (depresi yo gukomoka ku MTHFR ni icyiciro gikomeye kandi ishobora guhinduka neza no gukoresha 5-MTHF ituma hagombwa gutangirira imiti y'indaro. Niba ibimenyetso byo mu mubiri by’umuntu birakomezaga nyuma y'ibyumweru bibiri, hanyuma umuntu atabifiteho icyo arimo gukora, hamwe na hamwe, hasuzumizwa n'abaganga bafite ubumenyi bwihariye. Imiti y'indaro ishoborwa, ariko ntikongereho imiti ya DXM—ntibyongereho.
- ADHD: Abantu batavuye kuvumburwa ko bafite ADHD barushaho kuba benshi mu bagize abanyabyaha b'imiti ya DXM. Ibihombo byo gukurikirana no kureba uko umuntu afite ADHD bigomba gukorwa vuba, igihe umuntu aba agiye kuvuka. Itibwiriza ritagatangaza (atomoxetine, guanfacine, viloxazine) ni ngombwa kubantu bafite impungye zo gufata imiti itangaza, ndetse n'abanyabyaha b'imiti ya DXM. Kugira umuntu afashe imiti itangaza yo kuvura ADHD bisaba gushyiraho ibitekerezo byinshi no kwirebera neza, kandi hakwiye kugira umuganga ufite ubumenyi bwihariye mu bijanye n'ubuzima bwo guhagarika imiti.
- Uburwayi bwo guhangana n'abandi: Ibiranga bya DXM ku myanya ya sigma-1 na serotonine bifasha kugira uburyo bwihariye bwo kwihanganisha no kuruhuka, kandi ibyo bigereraho abantu bahura n'uburwayi bukabije bwo guhangana n'abandi. Buspirone (itanga umusaruro utera intananizo), CBT, na gahunda zivuga kuvura indege za serotonin (nyuma yo kwirinda DXM burundu) zigufasha gukemura ikibazo gikomeye.
- Ibyorezo n'ibimenyetso by'umutekerezi: Imikundizo ya DXM ifite ingaruka zo guhuza ibintu bitandukanye, kandi iyi ngaruka zifasha gukuraho impungye—igihe cyo kugira uburyo nk'ubwo ketamine ifatira kugira ngo umuntu atongere yibuke ibyo yishweho. Gukoresha imirongo mishya yo guhuza, CPT, cyangwa andi ma-programme agereranyije ikiguzi cy'umutekerezi hamwe n'uburyo bwo koroherwa.

4.7 — Gushyikirana ibitekerezo byo mu butumwa.

- Magnesium glycinate (400mg y'umwimburuko, saa munani za nimugira): Kugabanyiriza imikorere ya NMDA no gushyigikira GABA.
- Glycine (3-5g, iminuta 30 mbere yo kujya kwiruka): kugabanyiza ubushyuhe bw'umubiri kandi kurengera irembo rya NMDA.
- L-Theanine (200mg, umugoroba): Kugera ku bwohe bw'alpha no gukora imyubahiro kuri NMDA.
- Melatonin (0.5–1mg mu buryo bwo gufunga, igihe kwinshi): ifungiro ry'umwimerere ry'amasaha y'umunsi, rihuriwe no gutindira imikorere myiza y'uburiri.

- 5-HTP (50mg, saa munani za mugoroba, nyuma y'amapfaabu 3-5): ifasha mu guhindura serotonine mu melatonin, bigateza imbaraga ku kurara.

Ibyiciro by'umwimerere wifashishijwe indege z'indirimbo zo gufasha kwiruhuka: amabara, indirimbo zijyanye n'ibintu bitangaje, ibindi bisanzwe (theta binaural beats) (4–8 Hz); umusaruro munini cyane; ntihagombwa ko hari impuzamushinga zidakozwe.

Ibyo byerekeye DXM: kwirinda indirimbo zifite ishusho y'aho ushobora kuba warayinyoye - ubushake bwo kumenya ibintu bituma umuntu yumva uko yabaye buhunga kandi bushobora gutuma umuntu ashaka kuyongera.

4.8 — Gukoresha ibimenyistezo.

Peptide	Impamvu y'ubutanga mu gufasha umuntu gukira uburwayi bwa DXM.	Amatora.	Notes
BPC-157	Imikoraniro ku binyarwa bya NMDA; gukora ubushoborero bw'amashashi na serotonini; kubungabunga umubano hagati y'umutwe n'ibindi bituma amara atanga; kurwanya ibiza mu ndimi (bishingiye ku bushomeri bwo guhagarika imirimo ya acetaminophen).	Umunsi wa mbere ukurikizwa buri munsi.	BPC-157 ifite ubushobozi bwo gufasha imyuka itandukanye kandi igihe cyo gukira ku byiciro bitatu by'ibintu byangiza umubiri (NMDA, serotonine, n'igogoro) bigakorera hamwe. Ibyo BPC-157 bifite birashimwa ko bishobora gufasha igogoro kubona ubuzima bushoboka, kandi ibyo bibyazwa ari ingenzi cyane mu gihe umuntu yafashe acetaminophen. Kugira utubipimo tw'inyama ni byo byoroshye kandi bifatika.
Selank	Imodoka y'uburindi itangaza amashyirahamwe ya GABA na serotonini; itera uburumbuzi butazwiho; ifasha cyane mu kurwanya uburemere bw'umutima (anxiyete) bya: (a) bwavuyemo gufata imiryango y'ibinyobwa ya DXM, kandi (b) uburemere bw'umutima buvuka ku kwinangira ibinyobwa.	Ibitegura by'ibyumvire Ibwihebe 1-8, uko bikwiriye.	Ku bantu bagize ubwoba biterwa no kunywa DXM (Sage COMT yagaragaje ko DXM ifite ingaruka ku sigma-1 na NMDA zifasha guhagarika ubwoba buherukira), Selank itanga inkunga itazatuma umuntu yiyumburana, kandi igorora serotoni kugira ngo hagire amahoro mu gihe umuntu aba agiye gutoza. Iyongerwa mu maso.

Ntabwo ndumva.	Uruhare rwa BDNF rukura; ubwiyongera bw'ubushake; gukora ibintu by'umutungo ku butware bwo mu mwihano. Ibiranga bya DXM bituma ibirungo bitazajya bigera ku bipimo byakwiye, kandi uko umuntu afite ADHD nabyo birangira ubwonotewe bw'ubwenge, ariko ubu burebure bwa BDNF bufasha kugorana iyi mvura.	Icyumweru cya kabiri n'amatariki yanakurikira ho.	Ibuvumbuzi bishobora gukurikira ubuzima bw'umuntu: guhagarika intambara, kwirinda ibiyobyobye, no kubaho neza. * Guhagarika intambara ni gahunda y’imihigo yo kugera ku byo ushaka mu buzima. * Kwirinda ibiyobyobye ni ukwita ku mibereho yawe kandi ugumana n'abantu bazakugira inshuti. * Kubaho neza ni ukunyura, kwishimira, no gukora ibintu by'ubutore. Niba ufite ikibazo cyo gutanga amashyuja, ushobora guhamagarana iyi nimero: 1-800-662-HELP (4357).

Icyiciro cya 5 — Inyifato y'umutungo wa DXM — Kumenya no guhagarika.

THE CENTURION — Uruhumye rwa Kagati rurebwa mu minota 10 ahandi hose, muri poromagasi y'imiti – Ibuye by’ibintu bifatwa mu masaha ya mbere.

Ibyifoto vya gufata umuti wa DXM bifite ubwoko bunini byatumwe n'ubushoborero bwo kubona uyu muti mu masantrosi: urugendo rwa "nyanzeza yo gukoresha" kugera ku kuba ufite umuti ni igihe gito cyane kuruta ibindi bimaze kuvumburwa muri iyi gahunda. Ibyifoto bya gufata imiti y'ubusore (opioids) bisaba kumenya aho ushobora kubona iyo miti. Ibyifoto byo gufata imiti itanga ingufu (stimulants) bisaba umuntu ufasha kugura cyangwa uko ushobora kubona iyo miti. Ibyifoto bya DXM bisaba kuba hafi y'isantrosi kandi kugira amafaranga $8. Uburyo bwo kwirinda gufata uyu muti bugomba gukora mu minota 10 hagati y'icyorezo n'igihe ushobora kujya muri isantrosi.

Ibiranga by'Uruhumyi rwa DXM.

Ntabwo numva.	Ibihe by'imbere.	Ibyihebitse.
Kubona ibiciro by'ibicurungira umugongo n'ibyatsi bifasha mu mavumbi.	Ubwumvikanye kandi bumaze guhinduka cyane mu buryo bwo gukoresha ibimenyistezo by'ibintu bitagombwa: Ubwami bw'aho usanzwe uhura n'ibyifashishije buri kintu bushobora gutuma ubyifuza mbere yuko umuntu afata icyemezo.	Izindi nzira zishobora gufasha kugabanyiriza gutanga imiti mu masaha ya mbere yo gukomera. Igihe bidashoboka: hanyuma witeguye kutagombwa ko ujya mu ishami ry'imiti y’indwara z’ubuhungiro n'izindi. Igihe bishoboka, wiringije umuntu uyitewe utazakwerekeza ubwo uri gutanga imiti. "Iminota 10": igihe ufite uburyo bwo gushaka ibintu, subire iminota 10 mbere yo kwifata icyemezo cyo kugura.
Ubwoba.	Depression yatumye umuntu gukoresha DXM ni icyiciro gikomeye cyo gutuma yumva uburyoherane. Igihe imimerere ya kimweho itagera ku rwego rukwiriye—cyane cyane mu gihe cy'inyukunyukunyo ya NMDA no mu ntangiriro y'iyogosha, ubwo umutuzo wihariye uhinduka uburyoherane—ubwonko bwumva ko icyakorera iyi gahunda ni iyo mvandanye	Ibyiciro byo guhangana n'umutuzo bisaba gukorwa neza kandi bigomba kuba ari byo: 5-MTHF, imyitozo, kwigarurira umuyaga w'izuba, no guhura n'abandi bantu, ndetse na gahunda y'ubuvuzi bw'ubwonotsi. Umutuzo ushobora kuba urimo ibimenyetso by'umutima. Ibi bintu byose bigomba gukorwa bigateza imbere umutima, kandi ubu buryo buvuyemo

	ituma yumva uburyoherane.	kugabanyiriza amahoraho kuko butuma umutima ugenda neza.
Kwigaruka - kuba wenyine nta bintu bituma umenya ibindi.	Gukoresha ibiyobyobye bya DXM byari akenshi gukorwa mu buryo bw'umwe. Iyo umuntu aba yihariye kandi atagira icyo akora, biba ari ikimenyetso gikomeye - ubwonko butanga ubumenyi ko iyo mvura itangiza gukoresha DXM. Ubujiji n'ubutotsi ni bimwe mu byiciye inzego bituma umuntu yinjira mu byobye bya DXM.	Iburongo ni ubushobozi bwo guhindura ibintu. Ibyiciro by'iyi gahunda (Protocol 05) zishobora gufasha abantu kwisubiza mu buzima butagize ubuvumbuzi, aho bari baraye bakoresha DXM. Kugira ngo umuntu abeho neza, hakwiye gushyirwaho ingero zo guhuza no kubaka imibereho myiza, kandi by'umwihariko, kugabanya ibintu bituma umuntu agereraho.
Ubwoba bwinshi, cyane cyane ubwoya mu mibonano.	DXM, ubwo yari itanga imikundiro ku myumbano na kugabanyiriza umujaganyi, yabayeho gufasha abantu kwihanganira no gukomera. Iyongera y'umujaganyi mu byamamare, cyane cyane kubantu bafite umujaganyi wa sosiyete, yongeraga ubushake bwo gukoresha DXM kuko yabayeho icyo bwari icyihutishije.	4-7-8 burororе mu minota. Uburyo bwo gukoresha Selank niba wifashisha peptides. Kugabira umutuzo (buspirone, CBT, SSRI nyuma yo guhagarika DXM). Umutuzo ni icyiraro - hanyura umutuzo, ntihagire gusa kwishyuza.
Ibyumba by'abantu ku internet / ibintu bifatanya.	DXM ifite umuryango w'abantu benshi ushyira ahagaragara ku internet, kandi ufite ibitekerezo byumvikana n'ibyemezo by'abantu ku byo babonye. Kwitabira iyi mvugo — ndetse no mu buryo bwo gushakisha amakuru — bushobora gutuma umuntu yumva ubushake bwinshi, kuko ibitekerezo na stories zishobora kumutera imimerere yo kuba ashaka kuyifata.	Protocole ya 05 irengera ibintu by'igitse: amatorero, amaforamu, n'ibindi bice by'internet bifitanye isano na DXM. Buriya, ushobora guhagarika izo serivisi mu gihe cy'imvunduko ya mbere. Kugira ubwiryane ni ibintu bisanzwe; gukoresha iyo porogaramu bituma umuntu yumva uburyo bwo kwishushuranya.

IBYIFOTO BYO GUHOZA IBYIYUMVIRE BYA DXM - POROTOKOL YO KWIHUTISHA (MU MINOTA 10).

1. KWITINDA URUZINDIRO. Niba uri kuza mu maro ya ibicuruzwa cyangwa ikibuga, kwitindira. Kwitindira. Ntukomeze kugenda ugiye kuri iyo rwego. Iyo "amaminuti 10": icyemezo cyo guhitamo kugura kigomba gukurikirwa nyuma y'amaminuti 10 uko umutima wawe ushizeho. Iyi ni impaka iyo porotokoli igenderaho.
2. UBWIGUTISHO BWA 4-7-8: MIKORANYAMAHORO ITANU. Uruhumye rushoboka rwagaruka vuba kuko ibintu byatuma uruhumye rurambuye ari

hafi. Ibiranga by'ubwonotewe (vagal brake) ni ibisiganwa cyane kandi bifasha mu gihe. Itege nke itanu, ugiye gukora ubwigutisho ujya ushatse aho uraguruka cyangwa ukore ibindi.

3. Twara NAC na magnesium (cyangwa wibutse ko uzabyifuje mu gihe cy'ibindi bimenyero). Ibi biyongerwa bituma umubiri utanga ibisubizo ku byinshi bigateza ubushake, nk'umutungo wa NMDA n'glutamate. Ubushake bufite ishingiro mu ma kemika; buriweho mu buryo bw'ibimenyero bya kimikaro.
4. Icyorezo: Depression? Uruhumyi? Ububabare/igitumburwa? ADHD? Iyo mvura y'inzara igaragaza umwihariko uhuriyeho. Gutanga izina ku mwihariko uwo wo guhuza na gahunda z’imihandagiro zitangwa, aho kugira ngo gukoreshewe imihandagiro yo mu rwego rusanzu.
5. SHINDA IBIVUGIZO BIKORANABITSE CYANE. Niba icyiciro cyagutangaje ni uko uri hafi y'ahantu hose, shora ibivugizo byawe. Iyo ugiye mu bitaro, ntukinjire ahantu hose. Kuguhindura aho uriho ni igikorwa gikomeye cyane kugira ngo wigendere icyiciro cyo kuba hafi y'ahantu hose.
6. AMAZA. Ndagikomereza umushinga w'ubufasha ufite. Tanga ibyiyumvo byawe. Gusaba ibintu mu buryo budarebu kandi ufunzwe mu nzu bishobora kuba ingorwa kuko inshyashya yose - icyatumye ukoresha, kugura, no gukoresha - ishobora kubera wenyine kandi itazwi. Gutanga amakuru biratuma utabaho wenyine.
7. Kurengera umutuzo, gusenga, gukora imyito y'umuvuduko, kuryama ukurikije indirimbo. Uruhwiro rurimo ubushake bwo kugira ibintu – hafiho inzira ikindi giheyo kugira uko wigere kuri iyo mvanga.

Icyiciro cya 6 — Kugurira Ibihumbi by'Ubworoherane: Gushyira Imbere Uburyo Buhagije bwo Kwegera Ibikorwa bya "States DXM".

I CYENTURIYONI - Ibipapuro bya Centurian, uruganda rwa C-28, ku DXM - Ubuuswe bwariho kera.

Ibyo DXM ifite byinshi bitandukanye, kandi byagira ingaruka zitanduye ku bantu batandukanye. Uburyo bwo gushyiraho ibintu mu buryo bwihariye bwa "recovery architecture" buriwe bufasha kugira ngo byemerwe neza no gufatanya n'ibikorwa bitandukanye.

- Ku bafite ubushake bwo kwihagarika no gukemura ibibazo: inzira y'amayeri yo guhuza umubiri n'umutima (ketamine) - ishingiro ry'imikoresherezo y'ibintu bya ruhondo:
  * Meditasyon yo kugabanyiriza imikorere ya DMN.
  * NSDR/yoga nidra yo kwifashisha mu gufasha umubiri kugira ibimenyetso by'umutuzo bigomba kuba bifite ishusho y'ibyiyumvikanwa.
  * Ibirungo byo kubyuka (holotropic breathwork) ku buryo bw'ibindi bintu bitagombwa.
- Ku bafite uburyo bw'inyifasi, urutonde rw'uburyo bw'amahirwe mu gukoresha MDMA:

  * Guhangana n'ibitekerezo by'umwuka: Gusangira neza n'abandi kugirango ushobore kwiyumvisha no guhagarara, kureba ibintu ku buryo butaziguye.
  * Imyitozi: Kugira ngo ube umunyamaguru, ukoreshe imikundiro yo mu maro (endorphins) n'ibindi bituma wiyumva neza (serotonin).
  * Gukorera hamwe: Kwitabira ibikorwa by’abantu benshi.
- Ku bafite ubushake bwo kumenya neza iby'ubuzima, urutonde rw'amasomo ku byo gutanga umuti LSD rurimo inshinga zo kwihanganira – inzira yoroshye n’igice gikuru cyo guhuza imirimo itandukanye no gushakira abantu ubufasha bwo kuguma mu buryo bw'umutekano.
- Gukemura ibimenyetso byo guhagarika umwanzuro (ADHD): Gushyikirana ibibazo by'ADHD — imiti itifite stimulant, ububasha bwo gukora, agace gato kigaragazwa neza, ishusho y'uburyo dopamine ifungurwa. Kugenza akazi kazamura umusaruro kandi wigendere: amakuru, imyitozo ya gisports, kurandura porogramu, cyangwa ibindi bintu by’ubuhanga, bigomba kuba mu rwego rwo guhanahana n'ubushobozi.

Ibuyobozi bw'ibigo by'ubuvuzi (DXM) yahawe uburyo bwo gushyira mu bikorwa.

Nta kigomba	Ibijyanye	Bitegura uko	Ntabwo hari impuruza ziba

gushyikirwa.	n'ubuzima bukomeye.	byakorwa.	mu Kinyarwanda kuri ubu.
Kwihagarika no kwisubira - Gutsindisha umusaruro w'ubwonotewe, kuguma mu mahanga.	Meditasyon (ubuzima bwa mu mwenege); NSDR; imyitozo y'umuhondo.	Gukorera buri munsi - igihe kingana kirenga ibyumweru bibiri. Gufasha guhinduka (Protocole ya 04). NSDR: kwihagarara iminota 20-30 buri munsi, ukenewe gusobanurirwa. Kwirukanka umwuka mu buryo bw'umushinga n'uwari ushobora kubigira inama.	Imikorere ya DXM ku bipimo bita "NMDA" yatumye habaho kugabanywa kuntu ibintu byagenda, kimwe n'ibyo ketamine bitanga kandi kimwe n'ibyemerwa ko ubwenge bugeraho ubwo butumvikana. Umuntu uyifashisha DXM amaze kubona uyu muhango. Ubu buryo bugeraho mu buryo budatanga amafaranga atanu (8$) kandi butatwara ibice bya "liver".
Kwiyongera kw'umunezero no gukomera mu mimerere y'ubwumvu (sigma-1 + SERT).	Gukora imyitozo; gushyikirana neza n'abandi; kwihangayikira; amamagitabiri.	Gukora imyitozo ngororamana y'umuvuduko buri munsi. Kugira igihe cyo guhura n'abantu mwenegeye kandi muziranye. Kwishimisha no kwitera ibyo kurangaza. Kuryama umuziki wifashishije ibikoresho byubwenge bwihariye.	Ibijyanye n'ubumena bwa DXM, birimo ibintu bifatanya na sigma-1 na serotonine, bigeraho mu buryo buhagije binyuze mu serotoniini n'amaraso yitwa endorphin. Ibi ntibigeraho vuba nk'DXM, ariko bigera ahantu heza kandi bidahagarika imirimo y'umubiri.
Kwivura guhumekane.	CBT (ubuvuguzi bufatwa mu buryo bw'integuro) ku guhoza ibyorezo by'imishyatsi; buspirone; gukora imishinga; umuryango.	Porogrami y'ubuvuzi bw'imimerere y'umuntu ishingiye ku CBT (Mindfulness-Based Stress Reduction, amagruphe ya CBT, ubuvuzi bw'umwiharuro). Gukwirakwizwa kwihariye - hatangira mu bipimo bito kandi byiza. Buspirone (ifungurwa, itera ubugwari buke).	Ubwumaro bw'ubushake bwo gukomera butangwa n'imikemure myiza ya DXM, kandi byatangwa no mu buryo bukurikiranwa bw'umwani, hanyuma bikoranye umwanzuro. Uburyo ni uguhangana n'izindi ntambwe z'ubuzima bwo mu buzima, hatangirwa ahandi hegitse cyane maze ukajya uhinduka uko wiyongera. Ibi bintu birushaho kuroroka kure y'umuti kandi bigutanga burundu.
Ubwumvikanye.	Tradition yo gushakira ibisubizo; amacumbi y'amazi;	Umushingira umwe w'ubwumvikane ushyirwa mu bikorwa buri gihe. Iminyigo y'amasaha	Ibi bimenyebwa by'umutungo wa DXM bivuga ko bifite imikundano myinshi, kandi bitanga uburemerezo butuma umuntu yumva uko abonye

	imyitozo y'ubugingo; ubuvumbuzi bwo mu mutwe.	yo gukora ibintu mu mazi buri kwezi. Gukoresha imivugo yihariye (Holotropic breathwork) n’igihe cyo. Kwizihiza buri munsi, bigamije kugera ku mwumvikane ukomeye.	ibintu mu buryo busanzwe ndetse n'uburyo bw'ibindi bimenyebwa. Amateka y'imigenekerezo yo kwihangana yagiye ayobora abantu muri iyi mvugura kuva kera. Izi ngendo zigira uruhare ruto mu gutanga ubushake bwo kugera ahandi, kandi zigaragaza ko zishobora gufasha umuntu kugira ibimenyebwa bisanzwe – nta nyonshyita ituruka ku myemerero y'umwiharuro cyangwa ikibazo gishingiye ku gitondo.
Gusubiza ibimenyesha by'umutekanye (ADHD) - Kugira ubeho neza no kugabanya ingaruka z'inzara.	Kwivura ADHD (imiti + imyitwarire); kwihangana; agace gashoborwa; kurya.	Guhabwa ibizamini by'ubuvuzi bw'ibanze ku butware bwo guhuza neza, no gutanga itibugore cyangwa imiti itangaza umushinga (stimulant) ikwiriye. Gukora imyitozo ngororamana buri munsi (iminota 30-45), kuko ni icyo gikorwa gifite ibimenyetso by'ubutanga bwinshi ku bushoboro bwo gufasha mu kwirinda ibibazo by'ubutware. Kugira gahunda na neza y’ahaguruka.	Niba DXM yari ikoreshwagizwa cyane kugira ngo irengere ibimenyetso by'ADHD, gukwirakwizaho ADHD buri gihe bisobanura ko icyaba ari ingenzi cyo gutanga umuti kwinjira. Ibi ni ibisanzwe kandi bigorana cyane mu kuvura abantu bakoresha DXM. Gukwirakwizaho ADHD ndetse no gufasha ubwonko gukora neza, bituma umuntu agira ubushake bwo kugira imbaraga zo gukora ibintu, kandi byatanga uburyo bwihariye bwo kugira ubushake bwa DXM.

Ibuyumbuzi by'ubuvandimana bw'umwiteguro.

IGIHE CENTURION - Umuntu washoboye DXM agiye afite imyaka 15 ni ukundi, kuko umuntu ushobora heroin agiye afite imyaka 30.

DXM ni umwanda uhangwa cyane n'abategetsi bato n'abagore batarengeye imyaka 25. Uburyo bwo gufasha abantu kwirinda no kubanza mu buzima nyuma yo gukora ibiyobyobyo (recovery architecture) ku bagize iyi myaka ifite ibisobanuro bitandukanye n'ibindi byo gufasha abandi bantu bakuru kwirinda.

- Gukongera ubuzima: Gukongera ubuzima mu bantu batari bake b'abana bato byagenda imbere hamwe n'inyandiko z'ingenzi zo guhuza umuntu n'ibyago by'ubugabo. Umuntu atavomera icyerekezo cy'ubuzima yari afite mbere yo gukoresha ibiyobyobyo - ashobora kuba atari yaragize icyerekezo cyo ku

buyobozi bw'ubuzima. Gukongera ubuzima ni, mu by’ingenzi, guhuza umuntu n'ibyago by’ubugabo bwa mbere.

- Mu muryango, ku bakiri mu ruganda rwo gukira abategetsi n'abatozi batuye n'umuryango wabo, umuryango ni wo uba ari bumwe mu bice by'ibikorwa byo gufasha umuntu gukira. Abamwe mu muryango bagira icyo bashobora gutanga, cyane cyane abamenya uko DXM ifungura imyanya y'ubwonko—kandi abamenya ko si "gusa ibinyonjyaga" — bakaba bafasha byinshi. Igihe kingana, guhuza umuryango ni ngombwa.
- Mu byiciro by'ishuri no kwigira, umutekerezo mwinshi usanzwe ushobora gufata abantu bari mu mwanya wo gukira ivyo vyitwa "DXM", cyane cyane aho ukuntu umuntu yifashe n'ubushake (ADHD) atarahinduwemo. Ibi bishobora kugira ingaruka ku bikorwa vyigishwa. Guha abanyeshuri ibikoresho bituma bakora neza, gufasha abantu bari mu mwanya wo gukira ADHD, no kwifatanya n'abarebura (teachers) na bamwe bafashije abanyeshuri (counselors) ni zimwe mu ngingo zifasha muri uwo mwanya.
- Ibikorwa byo kwegurira abandi: Imibereho y'ubuzima y'abantu bafite ibintu bifatwa nk'imiti (peer relationships) ituma abantu batanga amahugurwa, igomba guhinduka nk'ibindi bihe byo gukora impinduka mu buzima. Kugura abandi bantu batazifashisha iyi mvandiro — binyuze mu mikino, ubwenge, amatsinda y’ishuri, no mu bwiza – ni umuti ukomeye wo guhinduza imibereho y'abana bato.
- Iterambura ry'umwuma: Bamwe mu bavandimwe bagurisha DXM bakoresheje ibintu byo guhagarika no guhindura ububasha bw'ubwonotewe bwa DXM kugira ngo batekereze ku bibazo by'iterambuka (imyirondoro, akimenyetso, intyibugabo mu muryango, ibisubizo ku by’ubuzima) bituma batagira uburyo bw'abakuwemo bwo kubitegura. Gukongera kwihangana ni ukubaka ayo mahame—mu buryo bw'iterarerano, ubushakashatsi, n'umuryango nyayo.

Ingero ya 7 — Kugira Umenye Neza Ibihe Byo Gukomera: Itorero Ryanyu.

Igihe.	Protocole.	Umwizirikagurisha w'ibintu by’umwimerere.	DXM-specific notes
Ibihumbi by'ibyo gukora ku buryo bwihariye n'uburemere bwo kwirinda (kuva umunsi wa 0 kugeza umunsi wa 7).	Umuganga; ibizamini byo gukurikiriza imyemerere y'igogoro; Icyiciro cya 0 cy'iyi gahanda.	Ebiobirori byo gukurikiriza uko Acetaminophen ifatwa; ibisobanuro ku gihe cyo gufata NAC; ibimenyetso mboneza ku mpfu; ubuvuguzi bw'ibindi bintu umuntu ashobora kuba afite.	Iyo hari icyangombwa cy'acetaminophen, gukoresha NAC mu kanya kandi gukora ibizamini byo kwerekeza ku buhungiro bw'igogoro mu minsi ya mbere. Iyi ni imwe muri serivisi zo gufasha abantu kubanza kurenga icyangombwa cy'DXM, ifite ubushake bwo gukorwaho vuba nk'ibindi bivugwa mu ma guides atandatu. Ibindi byose byashobora gukurikiranirwa buvuzi; kwerekeza ku buhungiro bw'igogoro ntikishoboka ko bikorwa buvuzi.
Ibuvuzi (umunsi wa 1-14)	Protocolo ya 07, Protocolo ya 09, Protocolo ya 17.	NAC (NMDA + hepati), maginezi ya, 5-MTHF, imikaya yo gufasha kwiruhuka, L-theanine, glycine.	NAC ku munsi wa mbere - ifite inyunganizi ebyiri (gufasha mu kuvura ibimenyetso bya NMDA no gukemura ibibazo by'igogoro). Magnesium ku munsi wa mbere. 5-MTHF ku munsi wa mbere. 5-HTP: keraho kugeza ku munsi wa 3-5 nyuma y'uko wanyoye DXM kugira ngo ugerageze serotoni syndrome ituruka ku kubura SERT. Ibiryo bifasha kwiruhukira bitangira mu kanya.
Ibigize ibimenyiste by'ubuzima (ibyumvikan wa kuva ku cyumweru cya 1 kugera ku cyumweru cya 4).	Ibyibazo byo gukurikirana : CYP2D6; SLC6A4; COMT; MTHFR; DRD4/DAT1.	Cytochrome P450 2D6 (CYP2D6) ubushoboro bwo gukora imimerere; ibimenyetso by'ubuziranenge mu byahagarika; ishami ry'isera; methylation.	CYP2D6 ni uburezi bw'ubuzima bwa nyuma buhabanye umwiharuro munini mu gufasha abantu kwirinda ibiyobyobye – butanga ibisobanuro ku byabaye kandi bigaragaza uburyo hose ushobora gukoresha imiti mu gihe uzongera. I bimenyetso by'ubuzima bwa nyuma (DRD4, DAT1) byerekeranye no guhagarika umutekereza (ADHD) birashobora gutanga ibisobanuro ku buryo ushobora gushyira mu mwiharuro ukomeye kuganiriza umuganga.
Gukwirinda Ibihuza By'ubuzima	Ibyiciro by'ubuzima bwa	Gukwirinda guhumekereza; gushakira umuntu	Iyi ni inzira muhimu cyane yo gufasha umuntu gukomera mu gihe gito. Iyo imirimo y'iyi nzira

(Iminsi 2-12)	ruhondo; Umuganga ushinzwe umutekano wa ADHD; CBT; Icyiciro cya 4.6.	uburyo bwo kwiyumviza no kugira ubuzima bwiza mu gihe afite ADHD; gukwirinda ubwoba bwinshi mu myitwarire; gukora ibikorwa byo gufasha abantu bahuye n'ibintu bibabije, igihe bizaba bikwiye.	igaragaza ikibazo cyari gikubiye muri iyo mirimo, kandi hanyuma hatangwa ubuvuzi bukwiye kugisubiza, byongera amahirwe yo gukomera kuko biratunganya isoko ry’ikintu cyo kwifashisha. Nta iyi nzira, umuntu ashobora gufata ibindi bimenyetso bitamufitiye akamaro.
Gusubirira kwa HPPD (ibyumimeri 1-8, igihe cyaba hari).	Icyiciro cya 4.5 cyo muri iyi porogaramu; muganga, mu gihe ibimenyetso ari bidasanzwe.	Kwivura ku gukoresha ibiyobyobyo (cannabis); imiruno y'izindi kemikali zifasha umubiri; kuruhuka; guhuza no kwihangana.	HPPD iturikiwe na DXM ni bwinshi igorwa kuruta HPPD iturikiwe n'imiti yera ubwonotewe, ariko ifite ibisigazwa bingana mu buryo byo kuyitwariza. Ibihe byinshi, ibyago byogeye mu minsi yo gukira ukwezi kimwe. Kwirinda gufata cannabis ni icyiciro cy'ingenzi cyane mu ngendo zo kwivura.
Ibuvugizi bw'ubuzima (ukwezi kwa 1-6)	Protocole ya 04 (imigendaya ga), Protocole ya 03 (gukora imyitozo), Icyiciro cya 6 cy'iyi gahanda.	Meditasyon ya buri munsi/NSDR; imyitozo y'umuvuduko; umuryango; ubwenge bushoboye bwa byinshi bufatanya n'imikorere y'ibintu bifatwa nk'iby'ubugingo (DXM).	Ibuvugizi bw'uburyo bwa rusange burusobezwaho kugira ngo butegurewe neza no gukorera ibintu by’umwihariko byatambukijwe na DXM. * Guhangana n'ibitekerezo: meditation + NSDR. * Kwiyubaha: imyitozo + kwishyira hamwe. * Kugira ubushake bwo guhura n'abandi: CBT + gukora ibintu by’umwihariko. * Gufata neza: itibagiro ry'ADHD + imyitozo. Rwandika iyi porogaramu mu buryo bukwiriye.
Ibiganiro n'imigendera no (amezi 3 kugabana).	Protocolo ya 20, Protocolo ya 21, C-28; umuco w'ubwirukiri zo igihe bisanzwe.	Ubwundi bw'umuntu utagize ibyorezo bya DXM; ubuzima umwihugu w’ubwonko bushobora kugera.	Abarimo mu cyiciro cy'abategetsi n'abatozi bafata umuti wa DXM: iki gishobora kuba icyiciro cyo kwubaka ubwese bwabo, aho kugira ngo bongereho ibyari birangajwe. Uburyo bwo gusuzuma, imirimo y'ubugingo, no guhuza abantu – ntibiba ahagarariye umuti wa DXM. Ari byo bigize icyiciro gikuru cyakozwe n'umuti wa DXM.

Icyiciro cya 8 - Umurimo W'Ubuzima: Ikibazo Kitagaragazwa.

Kugurisha kwa DXM ni ikibazo kirenga ubushobozi bwo gukemurwa n'ubuvuzi bw'ibanze, kandi hari impamvu esheshatu: bitaremu, bidasanzwe ko byaba bibi cyane, kandi bigeraho abategetsi benshi baba bari mu myaka yabo ya nyuma. Ntihagire uburyo bwo guhuza umuntu n'ubuvuzi (MAT) kuva kuri DXM. Ntihagire ibisigazwa by'ubuvuzi bifite gahunda ziba zivuga iby'uko kugurisha kwa DXM. Abaganga benshi nta mahaga menshi bahabwa ku bijyanye no kugurisha kwa DXM, uretse icyo bamenya ku bijyanye n'ibiyobyobye byangiza abana.

Ibi bishobora gukurikiza abantu bashaka inkunga: ashobora kuba ugomba kugira ubumenyi bwihariye ku buryo ibibazo byawe ari impuzabikorwa. Ibyiciro by'iyi gahunda, icyiciro cya 13 (Ibiganiro n'Umuganga), bigaragaza neza iki.

8.1 — Ubwifurije bw'ubuvuzi mu gufasha abantu kwirinda DXM.

- Gukurikirana imyemerere y'igogoro: AST, ALT, bilirubine, na GGT, byose bigamije kureba uko igogoro ifungiye, kandi bikorwa ku bantu bafite amakarita yo gukurikira ubuzima bwabo. Bikorwa igihe cyo gutangiza ubuvuzi no nyuma y'amezi atatu. Uburyo butoya bwo kwiyongera ari buhagaragara; umwiharuro ukomeye usaba ko umuganga uhunga mu by’igogoro amufitiye.
- Ibuvanye CYP2D6: ni iyo buvugire bw'ubuvuzi bwa genomiki bugira ingaruka zirenze izindi, by'umwihariko mu guhuza no gukurikiriza abafite amateka y'imiti ya DXM. kandi, biratanga amahugururo ku mutekano w'imiti mu gihe cyo gukoresha imiti itandukanye yifashishijwe CYP2D6.
- Gusuzuguro kuri ADHD: Gusuzuma gikorerwa n'umuganga cyangwa umwitsi ufite ubushobozi, kandi kikaba ngombwa ku gihe usanzwe ufatira abantu bahuye n'ibindi bibazo. Ibi bishobora gufasha mu kuvura no gukurashaho umuntu, kuko ADHD itaratakariwe ishobora gutuma umuntu yongera kwifuzanya cyangwa akoresha ibintu bitamutunga.
- Ibihumbi by'umutuzo n'ubwoba: Amagambo ya PHQ-9 na GAD-7 atanga ubushakashatsi bw'ibanze. Gutanga umuntu kwa muganga cyangwa umufundi mu byabyohozi kugira ngo abashe kwemeza no gushyira ahagaraga gahunda y'ubuvuzi.
- Gushyira ahagaragara: Iyo ibimenyetso by'ibibazo by'imboni birahari igihe kirenga ibyumweru 4 nyuma yo guhagarika, hakwiye gukorwa iperereza ry’ubwonotewe kugira ngo hagashakwe izindi mpamvu. Umuganga cyangwa umwerezi ufite ubumenyi bw'HPPD ni we ushobora gutanga inkuru.
- Gusuzuma bwa moya: niba ibicurungiza bifite imirire itangaza yashyizwe mu byiciro by'ubwinyagazi - kohereza umuntu kugira ngo amufashe gukora iperereza ry’amara no kureba ubushyuhe bw'umwihano.

8.2 — Kugirana ikiganiro n'umuganga.

Ubwundi bw'ubuvuzi bufatwa mu gihe ushaka guhabwa inkungahabwe y’ubuvuzi, uko ubitumira bitanga umukundiye. Gutangaza ko "ndahiye ibinyobwa byinshi bya siropi" bishobora gutuma umuganga akwibagirana. Iyi mvugo y'ubuvuzi ifatwa neza kandi ishobora gufasha:

Ndatekereza dextromethorphan (DXM) mu buryo butumwe, niba ngiye ku mugoroba [X] mg, kandi nkibikora [ubwonko]. Ndabyumva ibimenyetso by'ubwahene: ubangamukiro bwa NMDA, guhinduka kw'isysteme ya serotonin, ibimenyetso bisanzwe byo mu maso, no guhagarara. Ntaratekereza ku kurema kw'igikapu cyanjye kubera acetaminophen, kandi nshaka gukurikirana uko igikapu gishobora kugenda. Ndashaka na none gukora ipereereza kuri CYP2D6 kugira ngo numvire ibyiyumvo byanjye ku bijyanye no gutanga imiti. Ntekereza ko ndafite ADHD, depression, n'ubangamukiro, kandi ko biba ari byo byatumye ntangira gukoresha iyi miti, kandi ko bifuza kugira icyo bitanga.

Uwo murongo urushaho guhindura gahunda y'ubuvuzi, ukivuga ko utari wo gukwirakwizwa ahubwo kugira ngo hatangwe serivisi.

8.3 — Ibigorwa byo Kwishyura n'Amahugurwa yo Gukemura Ibice.

- Ibigo byo kugura DXM: Ibihugu bitandukanye bifite ibisabwa ku myaka (18+) kugira ngo umuntu agure DXM. Amavuriro amwe akomeye yashyizeho gahunda z'inyumvire zo gukurikiriza ibicuruzwa. CVS Pharmacy igenga ibicuruzwa bya DXM kandi ifungura abaguzi bakoresheje ibisabisho byemeza imyaka. Ibi bigo ni ingamba zishyirwaho kugira ngo hagereho umuntu, kandi ku bantu bari mu mwuka wo guhinduka, bashobora kubaha uburyo bwonowe bw'umutekano.
- Amakuru agufasha kugira ugoze neza igishoro cyitwa DXM: Urubuga rwa Erowid ku bijyanye na DXM (erowid.org/chemicals/dxm) ni rwo rufite amabwiriza menshi kurushaho y'uko ugomba kuba umusaruro. Ibyavugwa n’umwanditsi William White ku byerekeye ibibazo byajya bibaza ku DXM ni ingenzi.
- Ibyiciro by’ubuvuzi bw’abantu bifite ibibazo by'imikundiro (findtreatment.gov): Ndetse no kuba DXM itaratangazwa nk'icyanga cyangwa ikimenyetso gikomeye, guhuza ubuvuzi bw'imikundiro n'izindi ndwara ziba hamwe, nk'agahinda, ADHD, na gahinda, bigomba gukorwa mu buryo buhagaze binyuze mu mwanya wo kwishyurira ubufasha.
- Teen Line: 1-800-852-8336 (kwa abakiri mu myaka y'ubudahe gusa) — Ubufasha bw'abana b’umunyarwanda bazigishijwe uburyo bwo gufasha abantu bari mu butwari.
- Ubwumvikanye bw'igitangazina: Ndagira HOME kuri 741741.

Ijambo ryiza.

THE CENTURION — Umuti wohagariza ibihu, wari kubwira ukuri ku byo ukeneye.

DXM ntibishoboraga gukora ibintu byari gutanga ku mugore. Kampani ya Bayer yariyubatse kugira ngo ifashe mu kwirinda ubururu. Nyuma yo, yahindutse ikoreshwa n'abakiri abana bato, benshi bakamenya ko ituma umuntu atagire ubwoba bwinshi - urwo umuntu yumva akensheje cyane kuruta ubururu - inzara y'umutuzo w'ubuzima busanzwe, igiciro cy'ibimenyinya bitarenzwe cyangwa ADHD, ubushake bw'umuntu butuma abantu bumvira ibindi bintu, n'ibibazo by'ubuzima umwana akora atanga amahirwe yo kubona ibisubizo.

Ibigize urubuga rwa C-37 by'ingenzi: buri mwimerere y'umushinga ni ikimenyetso. Umwimerere y'umushinga wa DXM yari umwe mu bimenyetso bikomeye muri iyi tariki kuko iki kimenyetso cyari gikubiye cyane. Uburyo bwo guhagarika NMDA butuma ubwonko bugorana, uburyo bwo gushimira sigma-1 butuma umwuka ushimishwa, no kubumba serotonin bituma ibyorezo by'umubano bigabanuka - ibi ntibyari imimerere y'uruhumbu. Byari ibisobanuro by’ubumenyi bw’ibimenyana byatanzwe kugira ngo hatabweho ku bibazo by’ubwonko byo mu buvuzi, bibimwe bitarashyirwaho cyangwa bidahagaritswe neza n’isaha y’ubuvuzi.

Iyo status y'inyenyeri (OTC) yatumye DXM iba isobanutse cyane, kandi yo yishwe n'ibintu byo mu buryo butazwi. Nta muntu ushobora kuvuga ko umugore ufata ibinini bya cough syrup bigera kuri $8 ari icyiciro gikuru cy'ibisubizo. Nta muntu ubyaza abateenage bavuye kwishyura Robitussin, kugira ngo amenye ibyabaye mu rugo, ku ishuri, cyangwa mu mutwe yabo. Iyo mvandanye yaratunganyije ikibazo mu buryo butazwi, kandi ikibazo kikaguma kitaratunganyijwe.

Recovery yita umuntu ku kibazo. Depression – ibyore, biba mu mubiri, kandi akenshi bigategurwa n'ibintu bituma imirire ya MTHFR itagendera neza, kandi 5-MTHF izatanga inkurikizi aho SSRIs zitashoboraga. ADHD – umwihariko w’ubwonka utangira ku myumvire itandukanye, kandi uburyo bwo guhagararaho bukwiriye bushobora gutuma umuntu agira ubushake, nk'uko DXM yari yabihuriyeho. Ubwoba bw'imishyikirano – imyanya ya neuron itekereza ko imishyikirano ari ibintu bibangiza, kandi uburyo bwo guhuza abantu n’ubundi bukwiriye bushobora gutuma umuntu agira ubushake, nk'uko sigma-1 agonism yari yabihuriyeho. Ibyibazo by'ubuzima – bigomba kuba mu buryo bw'imigenekano y'imyaka myinshi yagiye ibyirinda, kandi DXM yari yarashoboraga gufasha umuntu kugira ubushake, ariko ku giciro. kuva ku irembo rya NMDA no gukoresha ibintu bituma igikere cy'ubuhaya gushira.

Umwanda w'umuti wo gufumbira ugiye kukubwira ukuri: umubiri wawe ufite ikibazo mu buryo bwo gukora byinshi (nervous system), kandi kimwe n'ikintu gituma gikora ibyo. Gufasha umubiri gukira ni ugushakisha icyo kintu, maze kugabanya ibintu bituma ugeraho.

Ibyinshi byakomekaga byahagarikanye ubwo wari gukoresha DXM. Gukira ni ukumenya ko ibyo byinshi byakomekaga byashoboraga kuguma mu buryo bwihariye. Umubiri wawe yagombaga kubyifitemo. Ibyo byonyine bisabye ni ifotoheza ryiza n'umuntu ushobora kureba ibyo umuti wo guhumeka wari kuvuga.

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DXM: umuti ukoreshwa mu kuvura, ariko ushobora no gukurikiza. Amakuru yihariye kuri erowid.org/chemicals/dxm.
Teen Line: 1-800-852-8336
Uburyo bwo guhagarika ingorane: Ndwandikirwa "HOME" ku numero 741741.
Soma amasomo yose agaragazwa mu "Recovery Kernel Complete Centurion Compendium".

Ikeraho: Gahunda ururimi rukoreshwa.

AMAHEREREZO:
1. Mwirukire gusa ibitekerezo byahinduwe. Ntihagombwa kwonerera, inyandiko z'inyishu, cyangwa ibisigazo.
2. Ntihagombwa kohereza ibindi bitumvikanye mu bushobozi bw'ubwandikirizo. Ntihagombwa gushyira inama, imishinga, cyangwa amatorero.
3. Ntihagombwa gutangaza numero z'amaterani iyo umwandiko utarahagarikiyeho.
4. IMIZINGA ITUMA: kopya neza, ntihagombwa kohindurwa: Recovery Kernel, Naloxone, COMT, DRD2, MTHFR, Blueprint, findahelpline.com
5. Hoherezwe ibintu byose: amabwiriza, amanota, amatafari, imyirondoro, [ibimenyetso].
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⚠ AMAKUGA YO GUSHOBORA KUGIRA UBUTORE - NTIBIMENYETSO BYA MEDISINI.

Ibyo ushobora kubikora kugira ngo ubone gukira ku DXM, mu gihe cyo guhuza ibintu by'umutekano:

* *[Inyandiko yuzuye]*